

# Inpatient Hospitalization of Utahns for Most Common Procedures and Diagnoses in 1996-1998



March 2001

Utah Health Data Committee  
Office of Health Care Statistics  
Utah Department of Health



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# **Inpatient Hospitalization of Utahns for Most Common Procedures and Diagnoses in 1996-98**

## **Introduction**

Hospital care has a crucial place in health care. It is, therefore, important to understand how, and for what purpose, those resources are used. Both diagnoses and procedures are important in describing the nature of a hospital discharge. In some cases, the diagnosis best explains the reason for a hospitalization (e.g., acute myocardial infarction—AMI). In others, the procedure best explains it (e.g. hip replacement). Thus, this report presents data on both diagnoses and procedures so as to more fully portray the different reasons for hospital care among Utah residents. Using data from the Utah Inpatient Hospital Discharge Database, 1996-98, this report compares numbers, rates, hospital charges, and length of stay for a standard set of diagnoses and procedures.

The analysis of hospital discharge data requires that over 10,000 individual diagnoses and procedure (ICD-9 CM) codes be grouped into a more manageable number of clinically oriented homogenous clusters. Clinical Classification Software (CCS) is a standard approach to classify hospital discharges according to the principal diagnoses and principal procedures. The CCS was developed by the Agency for Health Care Policy and Research (AHCPR) (now Agency for Health Care Research and Quality—AHRQ) for the Healthcare Cost and Utilization Project (HCUP) to present data from the Nationwide Inpatient Sample (NIS), which provide an opportunity for national comparison.

### **Uses of this report**

There are four reference tables in this report. Table R-1 lists the 100 most frequently performed principal procedures in rank order and the top 5 principle diagnoses by volume associated with each procedure. The 100 most frequent primary diagnoses and the top five (by volume) associated procedures are listed in Table 2. Both of these tables contain average length of stay and average hospital charges for the listed diagnoses and procedures. Tables R-3 and R-4 compare rates of selected diagnoses and procedures by sex and age.

This report helps in answering questions such as, “What procedures are commonly used to manage a patient with a particular diagnosis?” or “What are the most prevalent primary diagnoses when this procedure is performed?” Only clinicians will recognize procedures that are most likely the reason for hospitalization (e.g. appendectomy) and others that are almost certainly not the reason for hospitalization (e.g. lumbar puncture). Despite this limitation, we believe these data will be informative regarding the most common reasons for which people are hospitalized in Utah.

The definition of CCS categories based on ICD-9-CM diagnosis and procedure codes, can be found at: <http://www.ahrq.gov/data/hcup/ccs.htm>

The information presented in this report will be useful to several audiences. Health plans and insurance companies can compare the hospitalization experiences of their enrollees with the information presented in this report to pinpoint the differences peculiar to their membership. This can help them determine how payment policies affect the practice pattern. Hospitals, medical professionals and health care providers can

compare this information with their own practice to determine any similarities to and differences from state averages. Policy makers and researchers can pinpoint crucial sub-group differences, thereby guiding future research and identifying intervention needs.

This report is the first of the Utah Health Data Committee's reports to explore the analytical use of the Clinical Classification Software (CCS). Depending on users' feedback, the Committee may include the CCS categorization as a data element in the Utah Hospitals Inpatient Discharge public-use file to empower data users in working with a standard grouping.

## Results

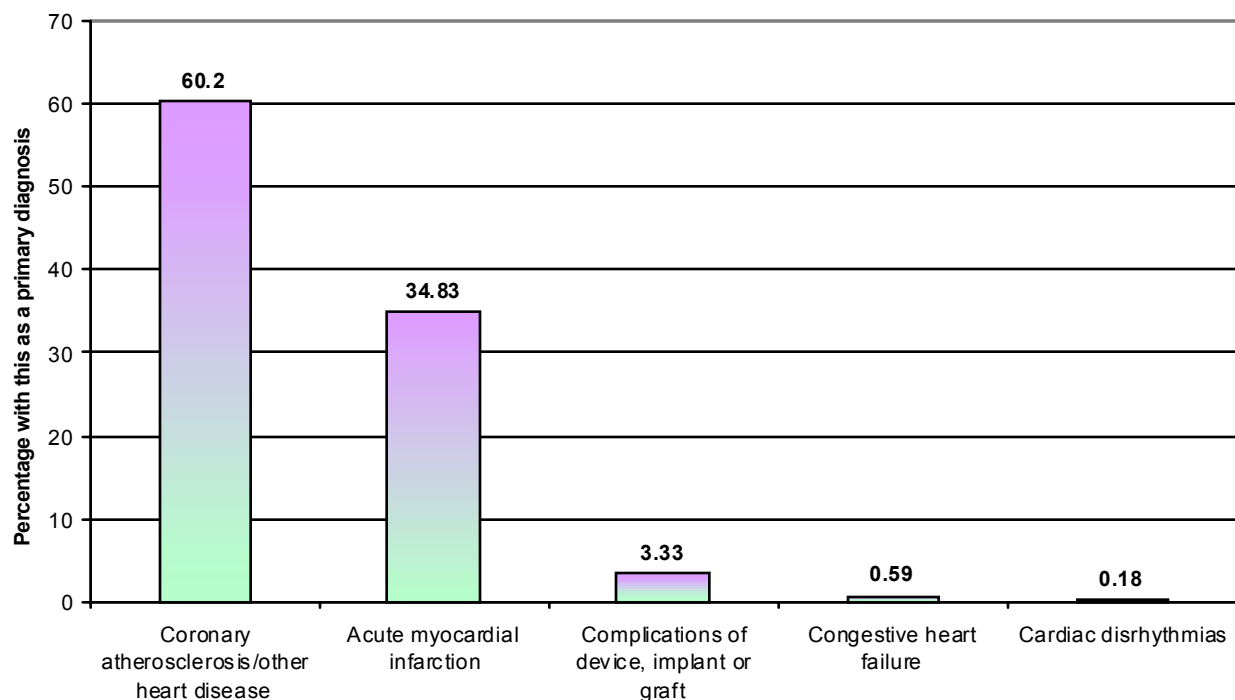


# Results

## Most Common Primary Diagnoses Associated with Top 100 Procedures

A useful feature of this report is that the reference Table R-1 provides numbers and rates, as well as average charges, mean length of stay and mean charges, for five most frequent primary diagnoses associated with each of the top 100 procedures during the 1996-98. This table can be used to answer questions such as, “What were the most prevalent primary diagnoses when a certain procedure was performed?” For instance, Figure 1 shows the top five diagnoses associated with *percutaneous transluminal coronary angioplasty* (PTCA) as the first listed procedure. It shows that 60.2% of all discharges where PTCA was the primary procedure has a primary diagnosis of *coronary atherosclerosis and other heart disease*.

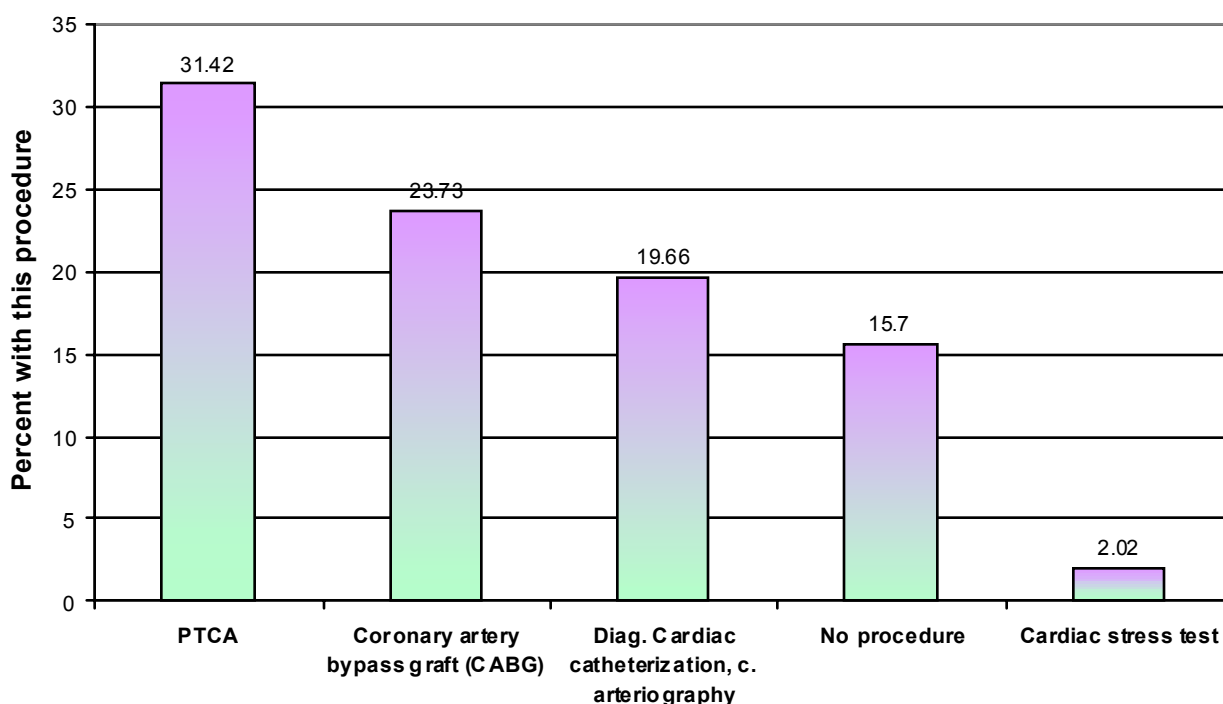
**Figure 1: Most Common Diagnoses Associated with the Procedure  
PTCA, Utah: 1996-98**



### Most Common Primary Procedures Associated with Top 100 Diagnoses

The reference Table R-2 shows the 100 most frequent primary diagnoses by volume and five most frequent primary procedures associated with each diagnosis. This helps answer questions such as, “What procedures are most commonly performed when one is hospitalized for a certain principal diagnosis?” To illustrate, Figure 2 shows the commonly performed primary procedures when the primary diagnosis was *coronary atherosclerosis and other heart disease*.

**Figure 2: Most Common Procedures Associated with the Diagnosis "Coronary Atherosclerosis and Other Heart Disease", Utah: 1996-98**



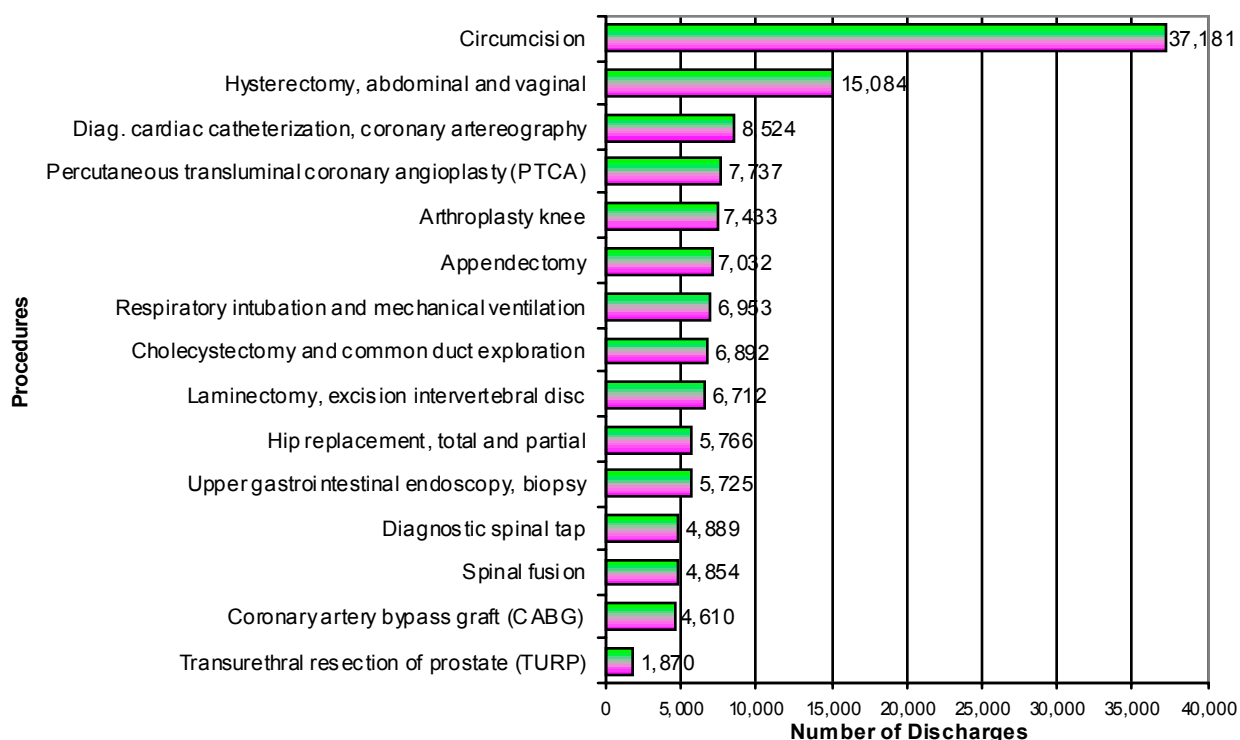
### Most Common Procedures by Volume

Figure 3 shows the most frequent procedures performed on Utah hospitalized residents during the 1996-98 interval (the complete list is given in Table R-1). A total of 680,182 discharges occurred during the three-year period. Of these, 631,341 or 92.8 % involved Utah residents. Of these discharges to Utah residents, 192,345 or 30.5 % had no procedure performed.

**Delivery-related Procedures:** Five of the ten most common procedures were delivery-related, ranking 3rd through 7th by volume (Table R-1). They were *episiotomy* (surgical incision to prevent traumatic tearing during delivery), *other procedures to assist delivery*, *repair of current obstetric laceration*, *cesarean section*, and *forceps, vacuum, and breech delivery*, accounting respective for 4.32%, 3.73%, 3.48%, 3.12%, and 2.48% of all hospital discharges. The 11<sup>th</sup> most common procedure was artificial rupture of membrane to assist delivery, which is a delivery-related procedure as well.

**Other Procedures:** The most commonly performed procedure was *circumcision*, accounting for a total of 37,181 discharges or 5.89 % of all hospital discharges. *Prophylactic (preventive) vaccination and inoculation* was the second most common procedure accounting for 4.36% of all discharges. The 8<sup>th</sup> ranking procedure was *hysterectomy*, accounting for 15,084 discharges or 2.39 of all discharges during 1996-98. The 9<sup>th</sup> and 10<sup>th</sup> most common procedures were cardiovascular procedures, viz, *diagnostic cardiac catheterization, coronary arteriography*, and *percutaneous transluminal coronary angioplasty (PTCA)*, which respectively consisted of 1.35% and 1.23% of all hospital discharges.

**FIGURE 3: Number of Hospital Discharges for Selected Common Procedures  
(Excluding Those Related to Delivery and Birth), Utah: 1996-98**



The 12<sup>th</sup> through 20<sup>th</sup> most common procedures, in the order of their rank by volume, were *arthroplast knee* (1.18%), *appendectomy* ( 1.11%), *respiratory intubation and mechanical ventilation* (1.10%), *cholecystectomy and common duct exploration* (1.08%), *laminectomy, excision intervertebral disc* (1.07%), *psychological and psychiatric evaluation and therapy* (0.94%), *hip replacement* (0.91%), *upper gastrointestinal endoscopy, biopsy* (0.90%), and *other therapeutic procedures* (0.8%).

Published data from the HCUP (Healthcare Cost and Utilization Project) for 1996 provides a national level comparison of top ranking procedures.

**Table 1: Comparison of top twenty procedures in HCUP states hospitals with top twenty procedures in Utah hospitals**

Top Twenty Procedures in 1996 UT Inpatient Discharge Data (Overall Rank)		Top Twenty Procedures in HCUP 1996 Sample (Overall Rank)	
	Percent*		Percent*
<b>Pregnancy-Related Procedures</b>			
Episiotomy (3)	4.51	Other procedures to assist delivery (1)	3.15
Other procedures to assist delivery (4)	3.36	Cesarean section (3)	2.27
Repair of current obstetric laceration (5)	3.32	Episiotomy (4)	2.03
Cesarean section(6)	3.11	Repair of current obstetric laceration (7)	1.64
Forceps, vacuum, and breech delivery (7)	2.57	Forceps, vacuum, and breech delivery (14)	1.08
Artificial rupture membranes to assist delivery (10)	1.27		
<b>Procedures not Related to Pregnancy</b>			
Circumcision (1)	5.84	Circumcision (2)	3.08
Prophylactic vaccination and inoculation (2)	4.84	Diagnostic cardiac catheterization, coronary arteriography (5)	1.87
Hysterectomy, abdominal and vaginal (8)	2.49	Upper gastrointestinal endoscopy, biopsy (6)	1.80
Diagnostic cardiac catheterization, coronary arteriography (9)	1.42	Hysterectomy, abdominal and vaginal (8)	1.62
Percutaneous transluminal coronary angioplasty (PTCA) (11)	1.19	Percutaneous transluminal coronary angioplasty (PTCA) (9)	1.38
Laminectomy, excision intervertebral disc (12)	1.18	Respiratory intubation and mechanical ventilation (10)	1.34
Arthroplasty knee (13)	1.16	Cholecystectomy and common duct exploration (11)	1.17
Appendectomy (14)	1.13	Alcohol and drug rehab. /detoxification (12)	1.15
Cholecystectomy and common duct exploration (15)	1.10	Other therapeutic procedures (13)	1.11
Respiratory intubation and mechanical ventilation (16)	1.08	Coronary artery bypass graft (CABG) (15)	1.05
Psychological and psychiatric evaluation and therapy (17)	0.94	Laminectomy, excision intervertebral disc (16)	0.98
Hip replacement (18)	0.90	Arthroplasty knee (17)	0.91
Upper gastroenteritis endoscopy, biopsy (19)	0.85	Prophylactic vaccination and inoculation (18)	0.89
Other therapeutic procedures (20)	0.82	Computerized axial tomography (CT) scan head (19)	0.85
		Hip replacement (20)	0.84

\* Number of discharges with this as a primary procedure per 100 inpatient hospital discharges



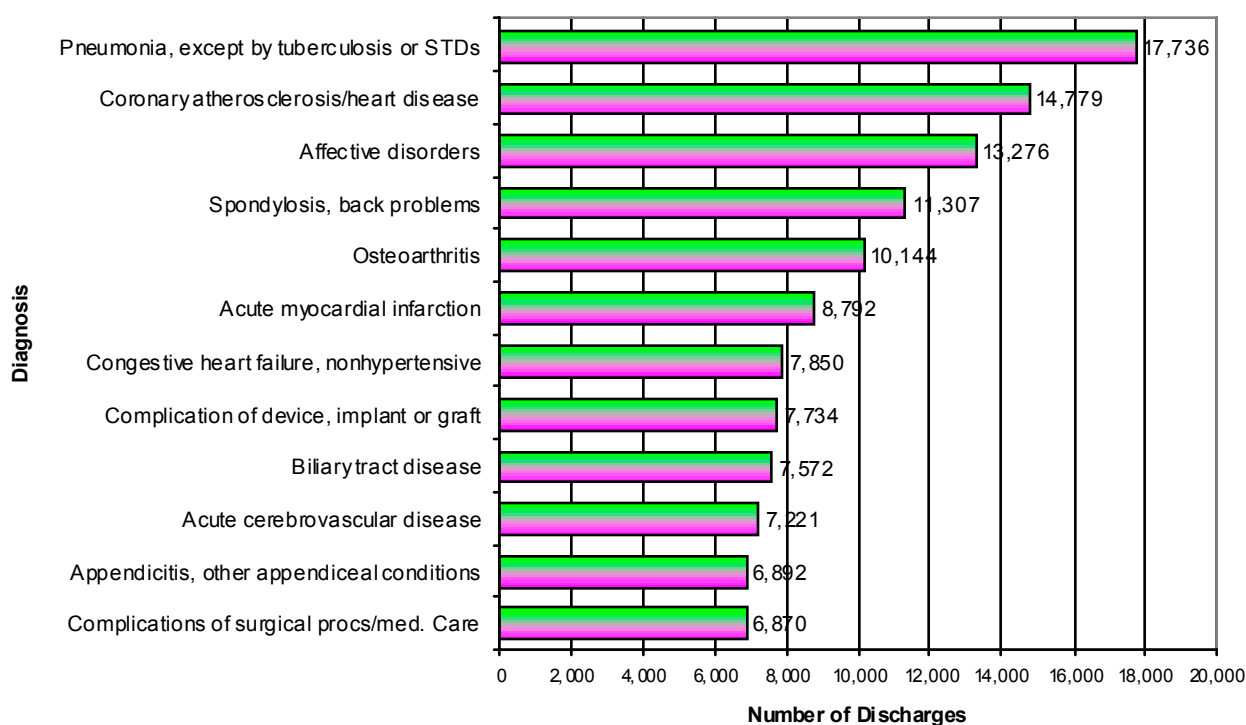
## Most Common Diagnoses

**Table R-2** lists in rank order, the most frequent diagnoses performed on Utah hospitalized residents as inpatients in 1996-98. The top 100 diagnoses comprised a total of 567,157 discharges or 90 % of the total discharges (631,350) to Utah residents.

As with the top procedures, discharges related to delivery and child births dominated the first three ranks among the most frequent diagnoses. These diagnoses included liveborn (125,321) normal pregnancy and/or delivery (21,465/3.40 percent), and trauma to perineum and vulva ( 20,705/3.28 percent) in that order. Other complications of birth (14,158/2.24 percent), umbilical cord complication (13,512/2.14 percent), and fetal distress and abnormal forces of labor (9,896/1.57 percent) ranked 6<sup>th</sup>, 7<sup>th</sup>, and 11<sup>th</sup> among all diagnoses. Figure 4 depicts the number of discharges for selected common diagnoses.

The top 5 diagnoses, not related to delivery and child birth, in terms of volume and rates, were *pneumonia* (2.81 percent of all discharges), coronary atherosclerosis and other *heart disease* (2.34 %), *affective disorders* ( 2.10 %), *spondylosis, intervertebral disc disorders, back problems* (1.79 %), and *osteoarthritis* (1.61 %).

**Figure 4: Number of Hospital Discharges for Common Primary Diagnoses for Inpatient Discharges, Utah: 1996-98**



The next five most frequent diagnoses were acute myocardial infarction or AMI (1.39%), congestive *heart failure*, nonhypertensive (1.24%), *complication of device, implant or graft* (1.22%), *biliary tract disease* (1.20%), and acute *cerebrovascular disease* (1.14%). Other leading diagnosis included *appendicitis* and other appendiceal conditions, *complications of surgical procedures or medical care*, nonspecific *chest pain*, *cardiac dysrhythmias*, *fluid and electrolyte disorders*, rehabilitation care, fitting of prostheses, fracture of neck of femur (hip), and fracture of lower limb.

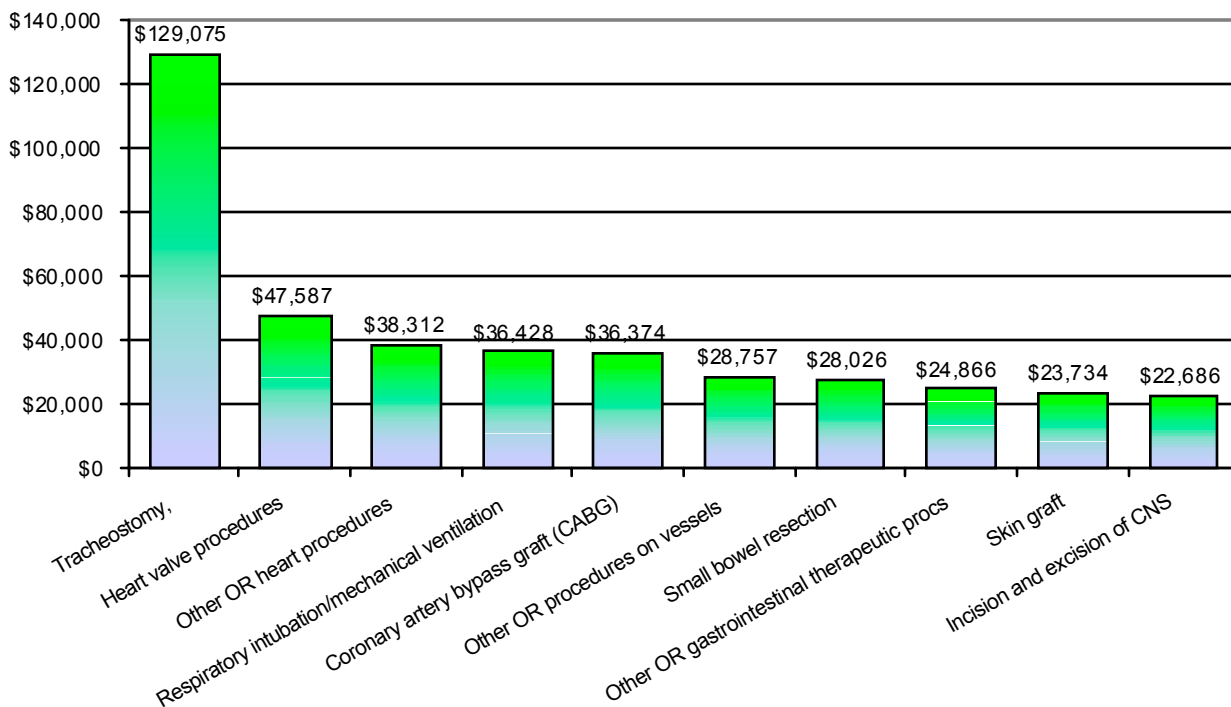
## Hospital Charges

During the three-year period of 1996-98, hospitalizations of Utah residents resulted in over \$4,455,346,000 in hospital charges, amounting to nearly 1.5 billion dollars annually.

**Procedures with highest total and average charges:** Among the **procedures** with discharges resulting in highest total charges, **total charges** ranged from a high of 247 million for *respiratory intubation* (\$247,348,664) to a low of slightly more than 82.6 million dollars for *heart valve procedures* (\$82,658,242). Other procedures claiming the highest share of hospital charges, ranking second through ninth, included *coronary artery bypass graft (CABG)* (\$160,226,677), *percutaneous transluminal coronary angioplasty (PTCA)* (\$146,338,528), *arthroplasty knee* (\$117,799,284), *tracheostomy* (\$110,487,828), *cesarean section* (\$106,572,793), *hip replacement* (\$97,780,579), *hysterectomy* (\$91,756,334), and *diagnostic cardiac catheterization, coronary arteriography* (\$89,730,563).

In the same three-year period, the **procedure** with highest **average hospital charge** per hospitalization was *tracheostomy* (opening in the wind pipe), temporary and permanent with an average of over \$129,000 per discharge. Tracheostomy is an example of a procedure where a high charge for the discharge reflects the fact that tracheostomy is performed on very sick patients, and not because it is the most expensive procedure. The second procedure with the highest average hospital charges per discharge was *heart valve procedures* (\$47,587), *other OR heart procedures* (\$38,312), *respiratory intubation and mechanical ventilation* (\$36,428), and *coronary artery bypass graft (CABG)* (\$36,374). The next five most expensive procedures were *other operation room (OR) procedures on vessels other than head and neck* (\$28,757), *small bowel resection* (\$28,026), *other OR gastrointestinal therapeutic procedures* (\$24,866), *skin graft* (\$23,734), and *incision and excision of CNS* (\$22,686). Figure 5 displays the average charges for selected procedures.

**Figure 5: Average Hospital Charges for the Top 10 Procedures With Highest Average Charges, Utah 1996-98**



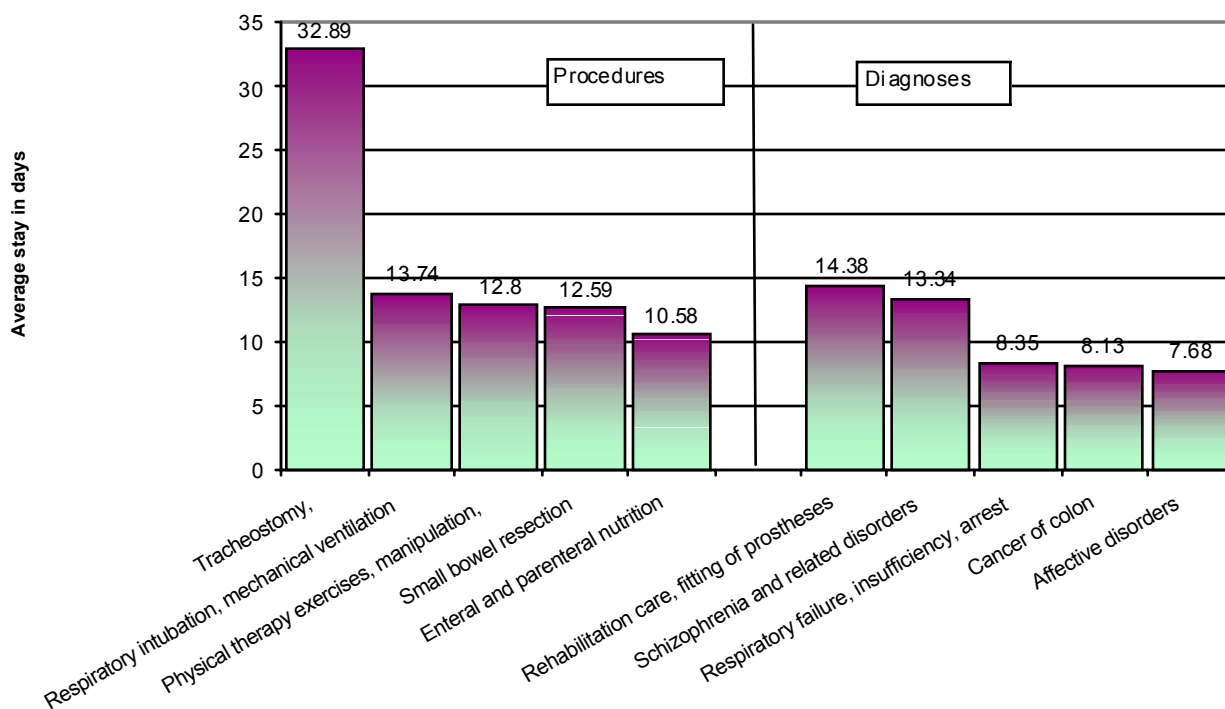
**Diagnoses with highest total and average charges:** During the three-year period, the five **diagnoses** resulting in the highest **total hospital charges** were *liveborn* (\$333,186,675), *coronary atherosclerosis and other heart disease* (\$255,899,135), *acute myocardial infarction* (\$165,822,415), *osteoarthritis* (\$154,895,954), and *pneumonia* (\$153,121,638). The next five diagnoses with the highest total charges were *complication of device, implant or graft* (\$112,834,581), *rehabilitation care, fitting of prostheses* (\$99,074,174), *affective disorders* (\$96,002,891), *spondylosis, intervertebral disc disorders, back problems* (\$95,750,200), and *acute cerebrovascular disease* (\$75,897,701). These top ten diagnoses accounted for \$1,590,539,394 or 35.7 % of total hospital charges.

Diagnoses with highest **average hospital charges** per hospitalization, were *heart valve disorders* (\$36,428), *respiratory failure, insufficiency, arrest etc.* (\$23,264), *acute myocardial infarction* (\$19,483), *coronary atherosclerosis and other heart disease* (\$18,343), and *intracranial injury* (\$18,122). The next five most expensive diagnoses included *rehabilitation care, fitting of prostheses* (\$18,119), *crushing injury or internal injury* (\$15,757), *cancer of colon* (\$15,734), *osteoarthritis* (\$15,539), and *complication of device, implant or graft* (\$15,227).

### Duration of Stay

Tables R-1 and R-2 show variation in length of stay for both the top 100 diagnoses and the top 100 procedures. Figure 6 depicts average length of stay for the five procedures and five diagnoses resulting in longest average stay per discharge.

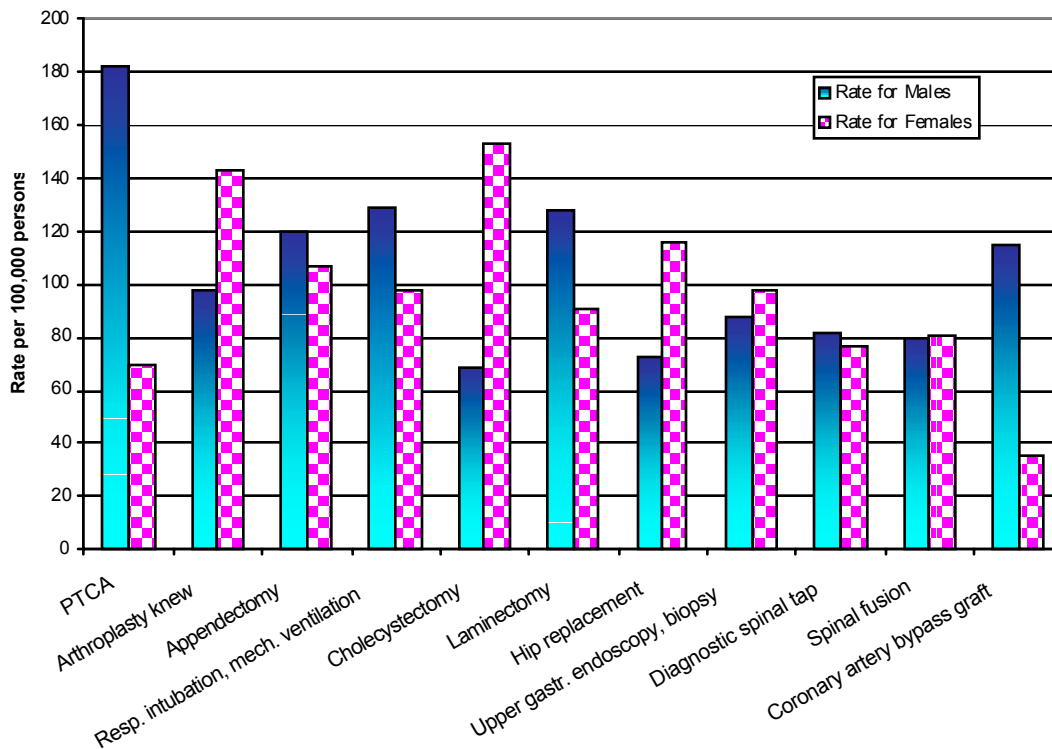
**Figure 6: Procedures and Diagnoses with Greatest Average Length of Hospital Stay, Utah: 1996-98**



## Variation by Sex

Table R-3 presents numbers and rates for selected procedures by sex and by broad age groups. The numbers and rates for some of these procedures vary drastically by sex compared to some other procedures. For instance, some procedures such as hysterectomy are exclusively performed on females and not on males whereas others such as transurethral resection of prostate (TURP) are performed on males and not on females. The rates for selected common procedures are shown in Figure 7:

Figure 7: Rates of Hospital Discharges for Common Primary Procedures by Sex, Utah: 1996-98

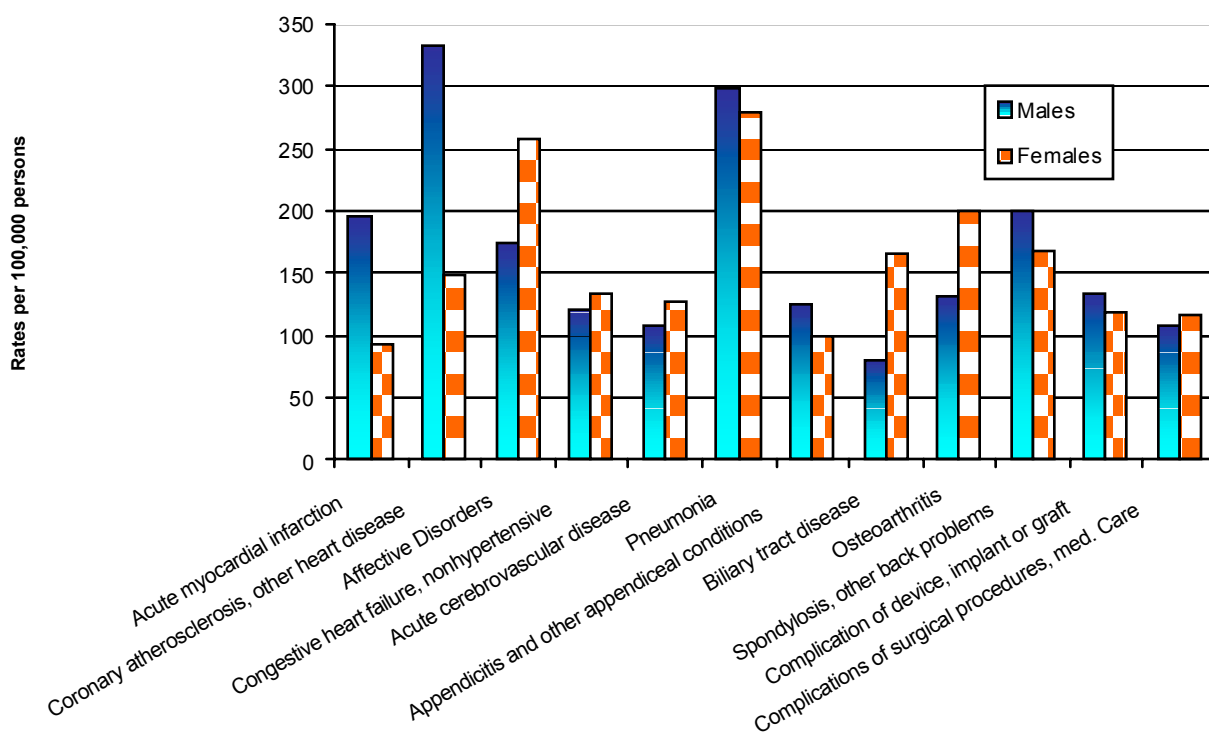


There are other primary procedures that are more prevalent among males than females and vice versa. Among the selected primary procedures given in Table R-1, those having a greater rate among men than women included *percutaneous transluminal coronary angioplasty* (PTCA) (181.8 per 10,000 males vs. 69.9 per 10,000 females), *appendectomy* (120.3 vs. 106.9), *respiratory intubation and mechanical ventilation* (128.6 vs. 97.2), *laminectomy, excision intervertebral disc* (127.4 vs 90.5), and *coronary artery bypass graft* (CABG) (114.5/10,000 males vs. 35.3/per 10,000 females).

In the same list of selected procedures, those performed most frequently on women included *arthroplasty knee* (143.5 per 10,000 women vs. 97.7 per 10,000 men), *cholecystectomy and common duct exploration* (152.9 vs. 68.8), *hip replacement* (115.2 vs 71.8), *upper gastrointestinal endoscopy, biopsy* (97.2 vs. 87.2), and *spinal fusion* (81.2 vs. 76.2).

Table R-4 presents number and rates of selected procedures by sex and by broad age groups. The numbers and rates for most of these common diagnoses are higher for men than for women with few exceptions. The comparison of rates for men and women for selected common primary diagnoses is presented in Figure 8:

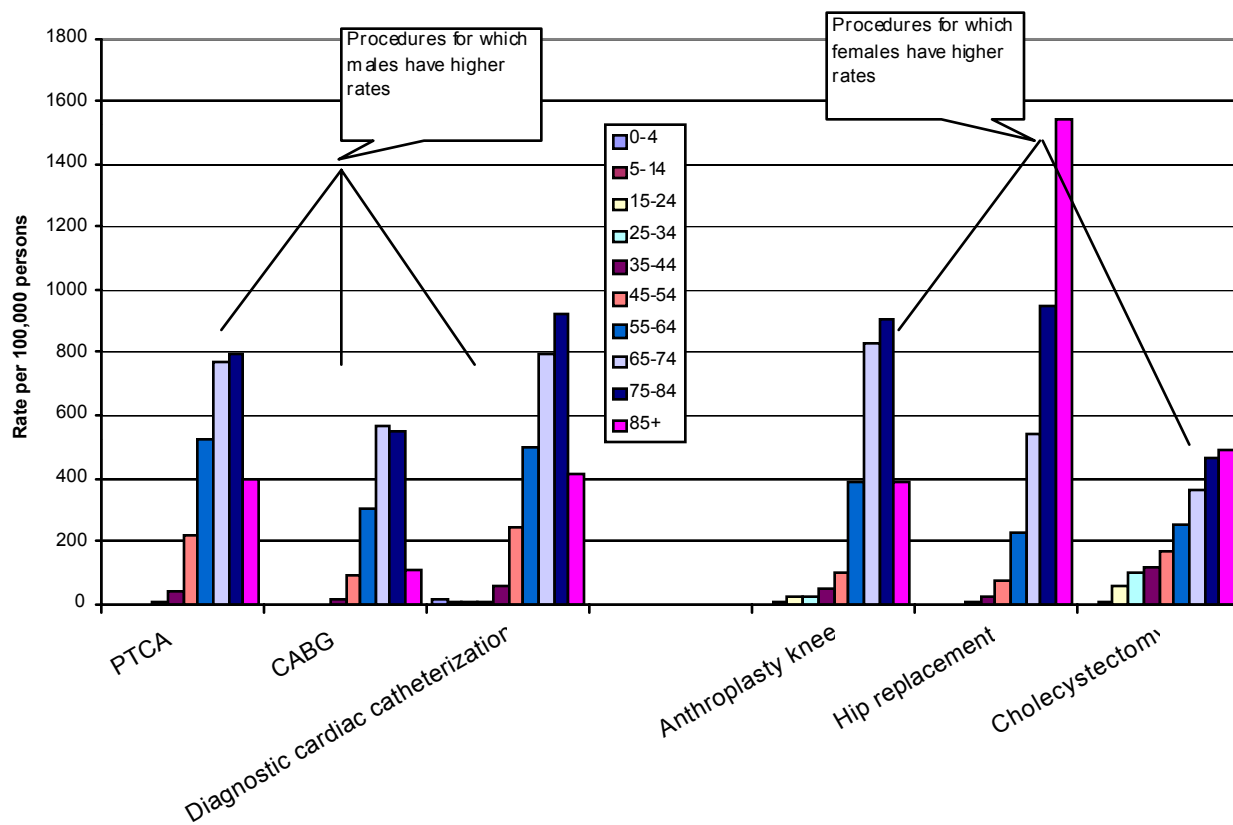
**Figure 8: Rate of Hospitalization for Selected Common Primary Diagnoses by Sex, Utah: 1996-98**



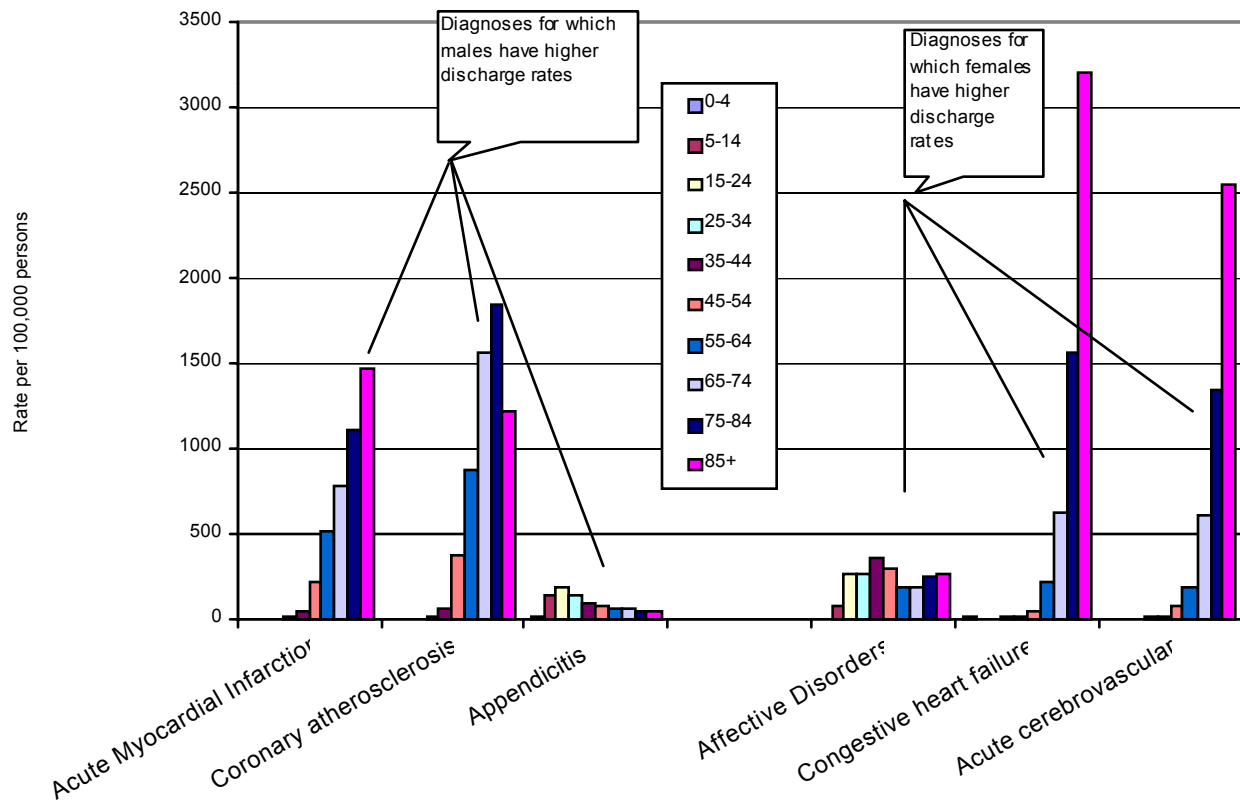
## Variation by Age

Most commonly performed procedures vary by age as well. Table R-3 shows numbers and rates of selected common procedures by age. Most of the common procedures are more common among older adults 65 years of age and over. For instance, cardiovascular procedures such as percutaneous transluminal coronary angioplasty (PTCA), and coronary artery bypass graft (CABG) are more common in the age group 65-84 than any other age group. With few exceptions, all other selected procedures in this list were also more common among older adults. The exceptions were appendectomy which is most common among children, youth, and young adults, respiratory intubation and mechanical ventilation, and spinal tap; the last two being most common among children 0-4. Figures 9 and 10 depict the age differences for selected procedures and diagnoses.

**Figure 9: Discharge Rate for Selected Common Procedures by Age, Utah: 1996-98**



**Figure 10: Discharge Rate for Selected Common Diagnoses by Age**  
**Utah: 1996-98**







## **Data Methods and Technical Notes**



# Data, Methods, and Technical Notes

## Source of Data

This report is based on data from Utah Hospitals Inpatient Discharge Databases, 1996-98. A description of this data file can be found at the following web site: <http://hlunix.hl.state.ut.us/hda/dataproducts.htm>

The analyses for this report were restricted to inpatient discharges for Utah residents. During this three-year period, a total of 680,182 discharges occurred in Utah hospitals, of which 631,341 or 93 % were Utah residents. Of these discharges to Utah residents, 205,429 or 30 % entailed no procedure.

The population estimates, used as denominators in this report for calculating hospitalization rates (Table R-3 and Table R-4), were provided by the Utah Governor's Office of Planning and Budget, 2000 file.

## Classification of Discharge—Clinical Classification Software

Conditions included in this report were defined by using groups of ICD-9-CM (International Classification of Diseases, Ninth Revision, Clinical Modification) codes. The ICD-9 codes were grouped by using Clinical Classification Software (CCS) developed by the Agency for Health Care Policy and Research (AHCPR) (now Agency for Health Care Research and Quality—AHRQ). The CCS aggregates ICD-9 diagnoses and procedures into a more manageable number of clinically homogenous categories. The classification of the CCS “clinical grouper” allows more sophisticated clinically focused analysis of ICD-9 data than diagnosis related groups (DRGs) (Alixhauser, 1999). Rates were computed for each condition based on those discharges for which the ICD-9 codes designated that condition or procedure as first listed diagnosis or procedure. The definition of CCS categories based on ICD-9 diagnosis and procedure codes, can be found at: <http://www.ahrq.gov/data/hcup/ccs.htm>

## Why use CCS to Categorize Procedures and Diagnoses

The Inpatient Hospital Discharge Database uses International Classification of Diseases, Clinical Modification, ninth revision (ICD-9-CM) to classify the diagnoses and procedures for which people are hospitalized. After diagnoses and procedures are classified in ICD-9 codes, their statistical analysis and understanding requires that over 10,000 individual codes be grouped into a smaller number of clinically oriented and relatively homogenous clusters.

Reports analyzing hospital discharge data often use DRGs. While DRGs are useful for combining many similar diagnostic and procedure categories for billing purposes, they were not designed for clinical purposes or for health services research. They were designed to identify groupings that were homogenous regarding hospitalization cost. For other purposes, DRG grouping, may be either too broad or too narrow. For instance, DRG 209 “major joint and limb reattachment procedures” is the second most frequent non-delivery related DRG in Utah hospitals. However many clinicians and researchers alike find this classification too broad to be useful; they are often interested in more refined categories such as CCS category # 153 ‘Hip replacement, total and partial’. In the DRG grouping scheme, this has been lumped together with other codes such as total knee replacement, ankle replacement, and reattachment of thigh, lower leg, and foot etc. There are other classifications available. The National Center for Health Statistics (NCHS) uses another classification scheme [1] which is even broader than DRGs and which presents shortcomings similar to DRGs.

Faced with similar challenges in analyzing the Healthcare Cost and Utilization Project (HCUP) data, the Agency for Health Care Policy and Research (AHCPR) (now Agency for Health Care Research and Quality –AHRQ) developed a classification scheme, that aggregates ICD-9 diagnosis and procedures into clinically homogenous, more manageable number of categories. This classification scheme is embedded in a program called Clinical Classification Software (CCS). The CCS is a “clinical grouper” that allows more sophisticated clinically focused analysis of ICD-9 data than DRGs [2]. Based on that classification system, this report presents descriptive analysis of the most frequent combinations of diagnosis and procedures for hospital inpatients in Utah during 1996-98.

One of the goals of this report is to illustrate the most common reasons for hospitalization in Utah. We are not aware of an established algorithm that identifies the “reason” for hospitalization, which may in some cases be a diagnoses and in others a procedure. For that reason we present tables showing both the most frequent diagnoses (with associated procedures) and the most frequent procedures (with associated diagnoses).

### **Computation of Diagnoses/Procedure Rates**

Rates (reported in Table R-1) for a certain diagnosis was based on discharges having that diagnosis as the primary diagnosis. The denominator for these rates was all hospital discharges. Similarly for procedure rates (reported in Table R-2), the numerator consisted of discharges having that procedure as the first listed procedure. The denominator for the rates was also the total number of discharges among Utah residents. The denominator for rates reported in Table R-3 and Table R-4 is mid-year population estimates.

### **Computation of Average Charges**

The average charges in the reference tables were computed based on discharges having the valid charges in the field of hospital total charges. However, the column labeled ‘Number of discharges–total’ included total discharges for a diagnosis or a procedure, regardless of whether the charges field had valid data. Therefore the total charges for a diagnosis or a procedure cannot be computed simply by multiplying total discharges for that diagnosis/procedure with the average charges for the same diagnosis/procedure.

## References

1. Popovic J, Hall MJ. 1998 Summary : National Hospital Discharge Survey. Hyattsville, Maryland: National Center for Health Statistics. 2000.
2. Alixhauser A, Steiner C. Most Common Diagnoses and Procedures in U.S. Community Hospitals, 1996. Healthcare Cost and Utilization Project, HCUP Research Note AHCPR, Pub. No. 99-0046. Rockville, MD: Agency for Health Care Policy and Research. 1999.



## **Reference Tables**

**Table R-1**

**THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES  
FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES,  
UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98**

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
-----					
P No procedure	192,563	100.00	30.50	3.57	\$4,158
D Liveborn	53,771	27.92	8.52	1.87	\$1,259
D Pneumonia (except that caused by tuberculosis or STDs)	13,056	6.78	2.07	4.05	\$5,889
D Affective disorders	9,341	4.85	1.48	6.89	\$6,817
D Congestive heart failure, nonhypertensive	4,639	2.41	0.73	4.12	\$5,663
D Fluid and electrolyte disorders	4,542	2.36	0.72	2.77	\$3,337
P Circumcision	37,181	100.00	5.89	1.79	\$1,116
D Liveborn	37,080	99.73	5.87	1.78	\$1,098
D Other perinatal conditions	26	0.07	0.00	3.19	\$4,344
D Short gestation, L.B.Wt, and fetal growth retardation	20	0.05	0.00	15.20	\$16,793
D Hyperplasia of prostate	10	0.03	0.00	3.30	\$5,442
D Immunizations and screening for infectious disease	8	0.02	0.00	1.50	\$730
P Prophylactic vaccinations and inoculations	27,497	100.00	4.36	1.67	\$987
D Liveborn	27,441	99.80	4.35	1.66	\$977
D Immunizations and screening for infectious disease	15	0.05	0.00	1.47	\$728
D Short gestation, L.B.Wt, and fetal growth retardation	13	0.05	0.00	12.31	\$13,333
D Other perinatal conditions	5	0.02	0.00	6.00	\$9,045
D Umbilical cord complication	3	0.01	0.00	1.00	\$1,646
P Episiotomy	27,263	100.00	4.32	1.48	\$2,489
D Normal pregnancy and/or delivery	10,630	38.99	1.68	1.42	\$2,381
D Umbilical cord complication	4,764	17.47	0.75	1.40	\$2,363
D Other complications of birth	2,798	10.26	0.44	1.46	\$2,484
D Fetal distress and abnormal forces of labor	1,517	5.56	0.24	1.43	\$2,387
D Other complications of pregnancy	1,452	5.33	0.23	1.49	\$2,478

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.



Table R-1

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Other procedures to assist delivery	23,558	100.00	3.73	1.55	\$2,676
D Normal pregnancy and/or delivery	6,039	25.63	0.96	1.40	\$2,344
D Other complications of birth	3,220	13.67	0.51	1.49	\$2,596
D Umbilical cord complication	3,135	13.31	0.50	1.41	\$2,440
D Trauma to perineum and vulva	2,824	11.99	0.45	1.49	\$2,635
D Fetal distress and abnormal forces of labor	1,326	5.63	0.21	1.44	\$2,406
P Repair of current obstetric laceration	21,953	100.00	3.48	1.53	\$2,606
D Trauma to perineum and vulva	13,261	60.41	2.10	1.46	\$2,482
D Other complications of birth	2,023	9.22	0.32	1.51	\$2,628
D Umbilical cord complication	1,618	7.37	0.26	1.45	\$2,402
D Fetal distress and abnormal forces of labor	1,031	4.70	0.16	1.50	\$2,541
D Polyhydramnios and other problems of amniotic cavity	717	3.27	0.11	2.06	\$3,352
P Cesarean section	19,717	100.00	3.12	3.38	\$5,416
D Previous C-section	5,836	29.60	0.92	2.85	\$4,492
D Malposition, malpresentation	3,431	17.40	0.54	3.07	\$4,852
D Fetal distress and abnormal forces of labor	2,640	13.39	0.42	3.31	\$5,597
D Fetopelvic disproportion, obstruction	2,552	12.94	0.40	3.16	\$5,315
D Hypertension complicating pregnancy, childbirth and the puerperium	976	4.95	0.15	4.37	\$7,391
P Forceps, vacuum, and breech delivery	15,651	100.00	2.48	1.67	\$2,886
D Forceps delivery	3,907	24.96	0.62	1.57	\$2,597
D Fetal distress and abnormal forces of labor	2,491	15.92	0.39	1.64	\$2,931
D Other complications of birth	2,092	13.37	0.33	1.61	\$2,822
D Umbilical cord complication	1,383	8.84	0.22	1.57	\$2,693
D Trauma to perineum and vulva	1,221	7.80	0.19	1.64	\$2,929

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

Table R-1

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Hysterectomy, abdominal and vaginal	15,084	100.00	2.39	2.79	\$6,102
D Menstrual disorders	3,483	23.09	0.55	2.55	\$5,605
D Prolapse of female genital organs	3,012	19.97	0.48	2.64	\$5,780
D Benign neoplasm of uterus	2,338	15.50	0.37	2.72	\$5,846
D Endometriosis	1,968	13.05	0.31	2.68	\$5,702
D Other female genital disorders	1,545	10.24	0.24	2.68	\$5,855
P Diagnostic cardiac catheterization, coronary arteriography	8,524	100.00	1.35	3.28	\$11,023
D Coronary atherosclerosis and other heart disease	2,905	34.08	0.46	2.69	\$9,807
D Acute myocardial infarction	1,917	22.49	0.30	4.06	\$13,626
D Nonspecific chest pain	1,383	16.22	0.22	1.93	\$7,596
D Congestive heart failure, nonhypertensive	552	6.48	0.09	6.16	\$15,523
D Cardiac dysrhythmias	211	2.48	0.03	4.58	\$12,066
P Percutaneous transluminal coronary angioplasty (PTCA)	7,737	100.00	1.23	2.91	\$19,278
D Coronary atherosclerosis and other heart disease	4,644	60.02	0.74	2.10	\$17,287
D Acute myocardial infarction	2,695	34.83	0.43	4.17	\$22,390
D Complication of device, implant or graft	258	3.33	0.04	2.58	\$18,809
D Congestive heart failure, nonhypertensive	46	0.59	0.01	6.93	\$28,667
D Cardiac dysrhythmias	14	0.18	0.00	4.93	\$21,525
P Artificial rupture of membranes to assist delivery	7,537	100.00	1.19	1.51	\$2,536
D Normal pregnancy and/or delivery	2,271	30.13	0.36	1.42	\$2,347
D Trauma to perineum and vulva	1,335	17.71	0.21	1.44	\$2,613
D Umbilical cord complication	1,240	16.45	0.20	1.47	\$2,473
D Other complications of birth	566	7.51	0.09	1.52	\$2,601
D Forceps delivery	405	5.37	0.06	1.73	\$2,518

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

Table R-1

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Arthroplasty knee	7,433	100.00	1.18	3.90	\$16,119
D Osteoarthritis	5,493	73.90	0.87	4.11	\$17,367
D Complication of device, implant or graft	651	8.76	0.10	4.52	\$15,470
D Joint disorders and dislocations, trauma-related	504	6.78	0.08	2.06	\$8,229
D Sprains and strains	324	4.36	0.05	1.57	\$7,528
D Rheumatoid arthritis and related disease	152	2.04	0.02	4.50	\$17,905
P Appendectomy	7,032	100.00	1.11	2.64	\$5,861
D Appendicitis and other appendiceal conditions	6,307	89.69	1.00	2.64	\$5,795
D Abdominal pain	276	3.92	0.04	1.83	\$5,070
D Lymphadenitis	126	1.79	0.02	1.90	\$4,875
D Other complications of pregnancy	67	0.95	0.01	2.93	\$6,228
D Noninfectious gastroenteritis	24	0.34	0.00	1.75	\$5,941
P Respiratory intubation and mechanical ventilation	6,953	100.00	1.10	13.74	\$36,428
D Liveborn	2,270	32.65	0.36	20.23	\$46,478
D Respiratory failure, insufficiency, arrest (adult)	816	11.74	0.13	10.12	\$33,782
D Pneumonia (except that caused by tuberculosis or STDs)	590	8.49	0.09	12.50	\$42,743
D Respiratory distress syndrome	328	4.72	0.05	20.80	\$46,840
D Other perinatal conditions	214	3.08	0.03	15.52	\$39,148
P Cholecystectomy and common duct exploration	6,892	100.00	1.09	3.69	\$9,594
D Biliary tract disease	6,078	88.19	0.96	3.33	\$8,759
D Pancreatic disorders (not diabetes)	460	6.67	0.07	5.55	\$12,571
D Other complications of pregnancy	69	1.00	0.01	3.86	\$9,722
D Septicemia (except in labor)	50	0.73	0.01	10.00	\$31,760
D Complications of surgical procedures or medical care	26	0.38	0.00	5.12	\$13,688

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

**Table R-1**

**THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98**

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Laminectomy, excision intervertebral disc	6,712	100.00	1.06	2.82	\$7,429
D Spondylosis, intervertebral disc disorders, back problems	6,259	93.25	0.99	2.62	\$6,998
D Other acquired deformities	77	1.15	0.01	3.83	\$12,719
D Complication of device, implant or graft	42	0.63	0.01	3.14	\$10,307
D Joint disorders and dislocations, trauma-related	35	0.52	0.01	2.83	\$7,933
D Other connective tissue disease	34	0.51	0.01	2.26	\$6,150
P Psychological and psychiatric evaluation and therapy	5,975	100.00	0.95	10.12	\$10,190
D Affective disorders	3,219	53.87	0.51	9.69	\$10,104
D Schizophrenia and related disorders	851	14.24	0.13	16.20	\$17,502
D Other mental conditions	502	8.40	0.08	6.56	\$6,576
D Anxiety, somatoform, dissociative, and personality disorders	290	4.85	0.05	9.86	\$8,541
D Substance-related mental disorders	244	4.08	0.04	6.23	\$6,028
P Hip replacement, total and partial	5,766	100.00	0.91	4.77	\$17,254
D Osteoarthritis	2,808	48.70	0.44	4.17	\$17,177
D Fracture of neck of femur (hip)	1,461	25.34	0.23	5.49	\$15,814
D Complication of device, implant or graft	932	16.16	0.15	5.05	\$18,616
D Other bone disease and musculoskeletal deformities	257	4.46	0.04	4.82	\$18,360
D Rheumatoid arthritis and related disease	67	1.16	0.01	4.61	\$19,100
P Upper gastrointestinal endoscopy, biopsy	5,725	100.00	0.91	4.26	\$7,721
D Gastrointestinal hemorrhage	1,786	31.20	0.28	3.12	\$6,216
D Gastritis and duodenitis	523	9.14	0.08	3.08	\$5,528
D Esophageal disorders	442	7.72	0.07	3.17	\$5,833
D Gastroduodenal ulcer (except hemorrhage)	216	3.77	0.03	3.04	\$5,064
D Fluid and electrolyte disorders	155	2.71	0.02	4.52	\$6,503

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

Table R-1

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Other therapeutic procedures	5,053	100.00	0.80	5.38	\$9,492
D Liveborn	888	17.57	0.14	12.04	\$20,552
D Phlebitis, thrombophlebitis and thromboembolism	441	8.73	0.07	4.98	\$5,592
D Hemolytic jaundice and perinatal jaundice	425	8.41	0.07	1.83	\$2,020
D Acute myocardial infarction	407	8.05	0.06	2.95	\$8,632
D Early or threatened labor	233	4.61	0.04	3.82	\$5,338
P Diagnostic spinal tap	4,889	100.00	0.77	4.78	\$8,619
D Meningitis (except by TB or STD s)	709	14.50	0.11	3.35	\$5,665
D Liveborn	657	13.44	0.10	10.41	\$19,809
D Other perinatal conditions	631	12.91	0.10	3.14	\$5,114
D Epilepsy, convulsions	218	4.46	0.03	3.14	\$6,415
D Viral infection	207	4.23	0.03	2.67	\$4,059
P Spinal fusion	4,854	100.00	0.77	3.44	\$14,472
D Spondylosis, intervertebral disc disorders, back problems	3,622	74.62	0.57	2.81	\$12,448
D Other acquired deformities	314	6.47	0.05	4.93	\$18,219
D Complication of device, implant or graft	237	4.88	0.04	3.67	\$14,762
D Other bone disease and musculoskeletal deformities	192	3.96	0.03	5.78	\$23,013
D Other congenital anomalies	160	3.30	0.03	4.82	\$18,516
P Coronary artery bypass graft (CABG)	4,610	100.00	0.73	8.24	\$36,374
D Coronary atherosclerosis and other heart disease	3,507	76.07	0.56	7.75	\$34,253
D Acute myocardial infarction	863	18.72	0.14	9.81	\$42,756
D Complication of device, implant or graft	153	3.32	0.02	7.63	\$37,926
D Congestive heart failure, nonhypertensive	31	0.67	0.00	14.39	\$51,026
D Heart valve disorders	11	0.24	0.00	14.36	\$54,730

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

**Table R-1**

**THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98**

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Treatment, fracture or dislocation of hip and femur	4,374	100.00	0.69	4.98	\$12,246
D Fracture of neck of femur (hip)	2,722	62.23	0.43	4.99	\$11,312
D Fracture of lower limb	858	19.62	0.14	5.20	\$14,428
D Complication of device, implant or graft	281	6.42	0.04	2.73	\$6,012
D Other bone disease and musculoskeletal deformities	117	2.67	0.02	3.33	\$10,002
D Pathological fracture	89	2.03	0.01	5.53	\$13,893
P Ligation of fallopian tubes	4,373	100.00	0.69	1.74	\$3,543
D Normal pregnancy and/or delivery	966	22.09	0.15	1.61	\$3,349
D Trauma to perineum and vulva	716	16.37	0.11	1.65	\$3,425
D Umbilical cord complication	606	13.86	0.10	1.58	\$3,332
D Other complications of birth	474	10.84	0.08	1.76	\$3,516
D Fetal distress and abnormal forces of labor	229	5.24	0.04	1.65	\$3,400
P Other vascular catheterization, not heart	4,222	100.00	0.67	8.14	\$16,432
D Liveborn	1,063	25.18	0.17	11.19	\$21,994
D Pneumonia (except that caused by tuberculosis or STDs)	298	7.06	0.05	8.82	\$17,458
D Septicemia (except in labor)	214	5.07	0.03	6.63	\$15,679
D Complications of surgical procedures or medical care	167	3.96	0.03	5.99	\$10,179
D Skin and subcutaneous tissue infections	147	3.48	0.02	5.35	\$7,744
P Alcohol and drug rehabilitation/detoxification	4,125	100.00	0.65	6.31	\$4,348
D Alcohol-related mental disorders	2,142	51.93	0.34	6.54	\$3,563
D Substance-related mental disorders	1,338	32.44	0.21	6.07	\$4,047
D Affective disorders	299	7.25	0.05	6.84	\$6,822
D Other mental conditions	50	1.21	0.01	4.08	\$4,399
D Schizophrenia and related disorders	30	0.73	0.00	8.33	\$8,498

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

Table R-1

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Blood transfusion	3,668	100.00	0.58	5.01	\$9,238
D Gastrointestinal hemorrhage	545	14.86	0.09	3.46	\$6,157
D Deficiency and other anemia	423	11.53	0.07	2.96	\$5,513
D Pneumonia (except that caused by tuberculosis or STDs)	214	5.83	0.03	6.63	\$11,148
D Septicemia (except in labor)	184	5.02	0.03	7.01	\$13,347
D Diseases of white blood cells	163	4.44	0.03	4.25	\$8,622
P Colorectal resection	3,614	100.00	0.57	9.33	\$19,991
D Cancer of colon	1,020	28.22	0.16	8.59	\$16,965
D Diverticulosis and diverticulitis	669	18.51	0.11	8.34	\$17,487
D Cancer of rectum and anus	400	11.07	0.06	8.68	\$16,166
D Other gastrointestinal disorders	309	8.55	0.05	9.57	\$20,316
D Regional enteritis and ulcerative colitis	214	5.92	0.03	9.84	\$20,847
P Diagnostic ultrasound of heart (echocardiogram)	3,573	100.00	0.57	4.31	\$7,805
D Congestive heart failure, nonhypertensive	618	17.30	0.10	4.38	\$7,324
D Acute cerebrovascular disease	370	10.36	0.06	4.22	\$8,045
D Cardiac dysrhythmias	361	10.10	0.06	2.62	\$4,987
D Pneumonia (except that caused by tuberculosis or STDs)	232	6.49	0.04	5.72	\$9,314
D Acute myocardial infarction	215	6.02	0.03	4.87	\$10,218
P Treatment, fracture or dislocation of lower extremity (other than h	3,535	100.00	0.56	3.09	\$8,161
D Fracture of lower limb	3,088	87.36	0.49	2.93	\$7,618
D Other bone disease and musculoskeletal deformities	136	3.85	0.02	2.29	\$7,616
D Complication of device, implant or graft	84	2.38	0.01	2.60	\$7,652
D Other fractures	39	1.10	0.01	5.36	\$15,980
D Joint disorders and dislocations, trauma-related	28	0.79	0.00	2.64	\$6,723

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

**Table R-1**

**THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98**

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Other respiratory therapy	3,242	100.00	0.51	4.06	\$4,646
D Liveborn	745	22.98	0.12	3.56	\$3,617
D Pneumonia (except that caused by tuberculosis or STDs)	744	22.95	0.12	4.20	\$5,312
D Asthma	282	8.70	0.04	2.90	\$3,517
D Chronic obstructive pulmonary disease and bronchiectasis	249	7.68	0.04	4.70	\$5,095
D Acute bronchitis	219	6.76	0.03	3.00	\$4,017
P Computerized axial tomography (CT) scan head	3,058	100.00	0.48	4.06	\$6,959
D Acute cerebrovascular disease	1,029	33.65	0.16	3.90	\$6,820
D Intracranial injury	339	11.09	0.05	3.10	\$7,021
D Transient cerebral ischemia	164	5.36	0.03	2.54	\$4,433
D Epilepsy, convulsions	125	4.09	0.02	2.74	\$5,089
D Senility and organic mental disorders	93	3.04	0.01	5.68	\$6,629
P Other OR upper GI therapeutic procedures	2,868	100.00	0.45	5.91	\$14,791
D Esophageal disorders	973	33.93	0.15	4.42	\$11,666
D Other nutritional, endocrine, and metabolic disorders	883	30.79	0.14	3.78	\$11,254
D Digestive congenital anomalies	215	7.50	0.03	4.97	\$9,535
D Gastroduodenal ulcer (except hemorrhage)	196	6.83	0.03	8.97	\$19,182
D Abdominal hernia	146	5.09	0.02	5.12	\$13,028
P Debridement of wound, infection or burn	2,681	100.00	0.42	7.54	\$15,373
D Complications of surgical procedures or medical care	443	16.52	0.07	7.55	\$15,034
D Skin and subcutaneous tissue infections	274	10.22	0.04	6.58	\$11,327
D Open wounds of extremities	274	10.22	0.04	3.61	\$9,293
D Diabetes mellitus with complications	228	8.50	0.04	7.88	\$12,120
D Chronic ulcer of skin	215	8.02	0.03	8.75	\$12,102

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.



Table R-1

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Cancer chemotherapy	2,587	100.00	0.41	3.81	\$8,411
D Maintenance chemotherapy, radiotherapy	2,305	89.10	0.37	3.36	\$7,362
D Secondary malignancies	45	1.74	0.01	8.18	\$21,526
D Non-Hodgkins lymphoma	35	1.35	0.01	6.23	\$13,921
D Leukemias	35	1.35	0.01	16.69	\$46,038
D Cancer of bronchus, lung	16	0.62	0.00	5.38	\$11,882
P Insertion, revision, replacement, removal of cardiac pacemaker or ca	2,388	100.00	0.38	3.96	\$22,489
D Cardiac dysrhythmias	1,065	44.60	0.17	3.25	\$20,673
D Conduction disorders	594	24.87	0.09	2.83	\$18,553
D Complication of device, implant or graft	240	10.05	0.04	3.15	\$15,671
D Congestive heart failure, nonhypertensive	100	4.19	0.02	6.89	\$27,803
D Acute myocardial infarction	87	3.64	0.01	8.43	\$41,517
P Incision of pleura, thoracentesis, chest drainage	2,294	100.00	0.36	6.36	\$11,286
D Pleurisy, pneumothorax, pulmonary collapse	620	27.03	0.10	5.40	\$8,241
D Pneumonia (except that caused by tuberculosis or STDs)	313	13.64	0.05	7.67	\$13,037
D Crushing injury or internal injury	271	11.81	0.04	4.75	\$8,644
D Congestive heart failure, nonhypertensive	203	8.85	0.03	5.57	\$8,950
D Secondary malignancies	150	6.54	0.02	4.78	\$7,948
P Other OR procedures on vessels other than head and neck	2,129	100.00	0.34	8.78	\$28,757
D Complication of device, implant or graft	413	19.40	0.07	5.19	\$16,182
D Cardiac and circulatory congenital anomalies	170	7.98	0.03	6.58	\$22,752
D Aortic, peripheral, and visceral artery aneurysms	161	7.56	0.03	6.64	\$21,849
D Complications of surgical procedures or medical care	148	6.95	0.02	5.99	\$15,740
D Acute cerebrovascular disease	116	5.45	0.02	13.70	\$56,608

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

**Table R-1**

**THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98**

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Colonoscopy and biopsy	1,995	100.00	0.32	4.53	\$7,541
D Diverticulosis and diverticulitis	331	16.59	0.05	3.15	\$6,308
D Gastrointestinal hemorrhage	193	9.67	0.03	3.15	\$5,714
D Regional enteritis and ulcerative colitis	168	8.42	0.03	5.11	\$7,422
D Intestinal infection	136	6.82	0.02	4.82	\$7,468
D Other gastrointestinal disorders	128	6.42	0.02	3.32	\$5,222
P Other therapeutic procedures on muscles and tendons	1,926	100.00	0.31	3.06	\$6,715
D Other connective tissue disease	528	27.41	0.08	2.56	\$5,713
D Sprains and strains	350	18.17	0.06	1.96	\$5,564
D Other congenital anomalies	142	7.37	0.02	1.54	\$4,175
D Open wounds of extremities	123	6.39	0.02	2.51	\$5,999
D Complications of surgical procedures or medical care	80	4.15	0.01	5.18	\$9,989
P Other non-OR upper GI therapeutic procedures	1,895	100.00	0.30	4.08	\$7,962
D Gastrointestinal hemorrhage	1,063	56.09	0.17	3.54	\$7,100
D Liver disease, alcohol-related	126	6.65	0.02	4.73	\$11,141
D Poisoning by other medications and drugs	98	5.17	0.02	1.60	\$4,207
D Other liver diseases	87	4.59	0.01	4.28	\$10,246
D Liveborn	63	3.32	0.01	6.29	\$7,152
P Transurethral resection of prostate (TURP)	1,870	100.00	0.30	2.56	\$5,619
D Hyperplasia of prostate	1,302	69.63	0.21	2.36	\$5,235
D Cancer of prostate	282	15.08	0.04	2.65	\$5,682
D Other diseases of bladder and urethra	52	2.78	0.01	2.10	\$5,571
D Cancer of bladder	38	2.03	0.01	2.34	\$5,348
D Calculus of urinary tract	37	1.98	0.01	2.49	\$6,047

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

Table R-1

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Cardiac stress tests	1,843	100.00	0.29	2.09	\$5,255
D Nonspecific chest pain	816	44.28	0.13	1.47	\$4,380
D Coronary atherosclerosis and other heart disease	298	16.17	0.05	2.12	\$4,898
D Cardiac dysrhythmias	107	5.81	0.02	2.58	\$6,113
D Esophageal disorders	89	4.83	0.01	1.43	\$4,459
D Acute myocardial infarction	79	4.29	0.01	4.30	\$9,437
P Heart valve procedures	1,787	100.00	0.28	9.19	\$47,587
D Heart valve disorders	1,150	64.35	0.18	8.28	\$44,364
D Cardiac and circulatory congenital anomalies	154	8.62	0.02	7.01	\$34,077
D Coronary atherosclerosis and other heart disease	152	8.51	0.02	10.56	\$54,729
D Complication of device, implant or graft	127	7.11	0.02	10.62	\$55,262
D Peri-, endo-, and myocarditis, cardiomyopathy (no TB or STDs)	63	3.53	0.01	15.83	\$67,921
P Other OR therapeutic procedures on joints	1,775	100.00	0.28	4.13	\$9,524
D Infective arthritis and osteomyelitis	345	19.44	0.05	5.22	\$10,321
D Complication of device, implant or graft	255	14.37	0.04	6.01	\$13,424
D Other connective tissue disease	229	12.90	0.04	1.87	\$5,414
D Osteoarthritis	184	10.37	0.03	2.22	\$6,962
D Complications of surgical procedures or medical care	128	7.21	0.02	5.50	\$10,650
P Other OR therapeutic nervous system procedures	1,720	100.00	0.27	6.00	\$18,313
D Other nervous system disorders	266	15.47	0.04	3.06	\$8,305
D Other and unspecified benign neoplasm	193	11.22	0.03	4.70	\$15,406
D Intracranial injury	124	7.21	0.02	8.77	\$29,553
D Nervous system congenital anomalies	122	7.09	0.02	6.34	\$15,319
D Other congenital anomalies	113	6.57	0.02	3.64	\$13,429

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

**Table R-1**

**TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98**

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Arthroplasty other than hip or knee	1,708	100.00	0.27	2.14	\$7,221
D Other connective tissue disease	559	32.73	0.09	1.67	\$4,613
D Osteoarthritis	300	17.56	0.05	2.58	\$10,717
D Sprains and strains	290	16.98	0.05	1.70	\$5,236
D Joint disorders and dislocations, trauma-related	166	9.72	0.03	1.73	\$5,855
D Fracture of upper limb	115	6.73	0.02	4.13	\$12,817
P Incision and excision of CNS	1,681	100.00	0.27	7.05	\$22,686
D Intracranial injury	389	23.14	0.06	7.85	\$26,747
D Acute cerebrovascular disease	316	18.80	0.05	7.33	\$21,450
D Cancer of brain and nervous system	289	17.19	0.05	7.44	\$23,217
D Other and unspecified benign neoplasm	257	15.29	0.04	5.42	\$19,648
D Other nervous system disorders	92	5.47	0.01	5.01	\$13,456
P Other fracture and dislocation procedure	1,681	100.00	0.27	3.25	\$8,449
D Fracture of upper limb	865	51.46	0.14	2.41	\$6,648
D Complication of device, implant or graft	324	19.27	0.05	2.17	\$5,575
D Other fractures	145	8.63	0.02	7.17	\$19,918
D Other bone disease and musculoskeletal deformities	83	4.94	0.01	2.19	\$7,265
D Joint disorders and dislocations, trauma-related	52	3.09	0.01	2.69	\$5,894
P Other OR lower GI therapeutic procedures	1,609	100.00	0.25	8.45	\$17,442
D Other gastrointestinal disorders	405	25.17	0.06	7.62	\$14,540
D Anal and rectal conditions	249	15.48	0.04	3.66	\$6,642
D Intestinal obstruction without hernia	205	12.74	0.03	10.42	\$20,766
D Digestive congenital anomalies	108	6.71	0.02	11.12	\$22,846
D Complications of surgical procedures or medical care	105	6.53	0.02	11.07	\$25,005

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

Table R-1

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Other OR therapeutic procedures, female organs	1,563	100.00	0.25	2.57	\$5,396
D Prolapse of female genital organs	614	39.28	0.10	2.50	\$5,541
D Ectopic pregnancy	160	10.24	0.03	1.99	\$5,171
D Other complications of birth	113	7.23	0.02	2.44	\$4,103
D Other female genital disorders	91	5.82	0.01	2.75	\$6,569
D Trauma to perineum and vulva	65	4.16	0.01	1.42	\$2,303
P Other OR gastrointestinal therapeutic procedures	1,497	100.00	0.24	10.36	\$24,866
D Complications of surgical procedures or medical care	251	16.77	0.04	9.32	\$20,545
D Pancreatic disorders (not diabetes)	162	10.82	0.03	15.90	\$39,311
D Secondary malignancies	124	8.28	0.02	7.49	\$18,879
D Biliary tract disease	121	8.08	0.02	9.70	\$22,748
D Cancer of pancreas	96	6.41	0.02	15.22	\$35,848
P Oophorectomy, unilateral and bilateral	1,458	100.00	0.23	3.20	\$6,572
D Ovarian cyst	373	25.58	0.06	2.63	\$5,419
D Other and unspecified benign neoplasm	270	18.52	0.04	2.89	\$5,756
D Other female genital disorders	191	13.10	0.03	2.93	\$5,987
D Inflammatory diseases of female pelvic organs	163	11.18	0.03	3.02	\$6,139
D Endometriosis	137	9.40	0.02	2.60	\$5,348
P Open prostatectomy	1,438	100.00	0.23	4.10	\$10,144
D Cancer of prostate	1,362	94.71	0.22	3.91	\$9,775
D Hyperplasia of prostate	60	4.17	0.01	4.10	\$7,987
D Liveborn	8	0.56	0.00	38.38	\$86,463
D Coronary atherosclerosis and other heart disease	2	0.14	0.00	1.50	\$18,976
D Inflammatory conditions of male genital organs	2	0.14	0.00	3.50	\$9,459

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

**Table R-1**

**THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES  
FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES,  
UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98**

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Magnetic resonance imaging	1,423	100.00	0.23	5.25	\$8,043
D Acute cerebrovascular disease	287	20.17	0.05	5.10	\$8,192
D Spondylosis, intervertebral disc disorders, back problems	112	7.87	0.02	3.12	\$4,176
D Epilepsy, convulsions	69	4.85	0.01	3.22	\$6,543
D Affective disorders	55	3.87	0.01	11.91	\$13,270
D Transient cerebral ischemia	53	3.72	0.01	3.25	\$6,240
P Other hernia repair	1,417	100.00	0.22	4.22	\$9,404
D Abdominal hernia	1,269	89.56	0.20	3.51	\$7,439
D Other congenital anomalies	37	2.61	0.01	16.84	\$46,287
D Complications of surgical procedures or medical care	19	1.34	0.00	6.89	\$25,809
D Esophageal disorders	14	0.99	0.00	5.50	\$11,099
D Intestinal obstruction without hernia	11	0.78	0.00	7.09	\$17,215
P Fetal monitoring	1,389	100.00	0.22	1.77	\$2,603
D Normal pregnancy and/or delivery	357	25.70	0.06	1.54	\$2,217
D Umbilical cord complication	170	12.24	0.03	1.52	\$2,298
D Trauma to perineum and vulva	153	11.02	0.02	1.54	\$2,738
D Early or threatened labor	139	10.01	0.02	2.53	\$3,319
D Polyhydramnios and other problems of amniotic cavity	128	9.22	0.02	2.13	\$2,708
P CT scan abdomen	1,382	100.00	0.22	4.56	\$7,420
D Pancreatic disorders (not diabetes)	170	12.30	0.03	5.70	\$8,572
D Crushing injury or internal injury	105	7.60	0.02	3.94	\$7,281
D Diverticulosis and diverticulitis	98	7.09	0.02	3.77	\$5,437
D Complications of surgical procedures or medical care	96	6.95	0.02	5.28	\$8,207
D Abdominal pain	74	5.35	0.01	2.09	\$3,665

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

Table R-1

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Physical therapy exercises, manipulation, and other procedures	1,367	100.00	0.22	12.80	\$17,362
D Rehabilitation care, fitting of prostheses	791	57.86	0.13	16.79	\$23,755
D Other non-traumatic joint disorders	61	4.46	0.01	2.43	\$3,848
D Acute cerebrovascular disease	52	3.80	0.01	12.02	\$8,775
D Other fractures	29	2.12	0.00	5.31	\$4,396
D Complication of device, implant or graft	27	1.98	0.00	2.48	\$3,875
P Other OR therapeutic procedures on nose, mouth and pharynx	1,343	100.00	0.21	2.79	\$6,970
D Other congenital anomalies	295	21.97	0.05	1.64	\$4,126
D Other upper respiratory disease	148	11.02	0.02	2.43	\$5,970
D Other upper respiratory infections	122	9.08	0.02	2.84	\$7,999
D Other and unspecified benign neoplasm	118	8.79	0.02	1.97	\$6,118
D Diseases of mouth, excluding dental	94	7.00	0.01	2.37	\$5,466
P Excision, lysis peritoneal adhesions	1,327	100.00	0.21	7.48	\$14,487
D Intestinal obstruction without hernia	600	45.21	0.10	8.98	\$15,927
D Other gastrointestinal disorders	151	11.38	0.02	5.15	\$10,988
D Abdominal hernia	111	8.36	0.02	5.44	\$10,123
D Inflammatory diseases of female pelvic organs	109	8.21	0.02	2.68	\$5,614
D Appendicitis and other appendiceal conditions	100	7.54	0.02	6.58	\$12,061
P Other OR therapeutic procedures on bone	1,322	100.00	0.21	2.94	\$8,138
D Other nervous system disorders	261	19.74	0.04	1.94	\$4,662
D Other bone disease and musculoskeletal deformities	241	18.23	0.04	2.57	\$7,852
D Other congenital anomalies	178	13.46	0.03	3.03	\$7,461
D Other acquired deformities	128	9.68	0.02	2.70	\$10,826
D Osteoarthritis	87	6.58	0.01	2.62	\$7,898

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

**Table R-1**

**THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98**

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Radioisotope pulmonary scan	1,299	100.00	0.21	4.60	\$7,678
D Pulmonary heart disease	382	29.41	0.06	5.39	\$8,267
D Pneumonia (except that caused by tuberculosis or STDs)	145	11.16	0.02	4.50	\$7,865
D Complications of surgical procedures or medical care	131	10.08	0.02	5.16	\$7,507
D Congestive heart failure, nonhypertensive	81	6.24	0.01	4.51	\$7,765
D Nonspecific chest pain	58	4.46	0.01	1.76	\$4,453
P Diagnostic bronchoscopy and biopsy of bronchus	1,274	100.00	0.20	7.68	\$16,121
D Pneumonia (except that caused by tuberculosis or STDs)	355	27.86	0.06	8.56	\$16,563
D Cancer of bronchus, lung	172	13.50	0.03	6.02	\$11,476
D Other lower respiratory disease	112	8.79	0.02	5.76	\$11,891
D Respiratory failure, insufficiency, arrest (adult)	85	6.67	0.01	8.91	\$22,482
D Aspiration pneumonitis, food/vomitus	45	3.53	0.01	7.27	\$16,845
P Other OR therapeutic procedures of urinary tract	1,219	100.00	0.19	5.17	\$10,965
D Other diseases of kidney and ureters	437	35.85	0.07	3.24	\$6,223
D Other diseases of bladder and urethra	143	11.73	0.02	5.51	\$12,033
D Cancer of bladder	121	9.93	0.02	9.42	\$20,217
D Genitourinary congenital anomalies	111	9.11	0.02	2.98	\$6,145
D Complications of surgical procedures or medical care	74	6.07	0.01	4.57	\$9,462
P Endarterectomy, vessel of head and neck	1,208	100.00	0.19	3.57	\$10,602
D Occlusion or stenosis of precerebral arteries	1,034	85.60	0.16	3.12	\$9,954
D Acute cerebrovascular disease	134	11.09	0.02	6.36	\$14,398
D Coronary atherosclerosis and other heart disease	11	0.91	0.00	3.64	\$15,634
D Transient cerebral ischemia	5	0.41	0.00	7.60	\$14,920
D Other and ill-defined cerebrovascular disease	4	0.33	0.00	2.50	\$9,740

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.



Table R-1

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Mastectomy	1,151	100.00	0.18	2.34	\$6,236
D Cancer of breast	1,096	95.22	0.17	2.29	\$6,146
D Nonmalignant breast conditions	23	2.00	0.00	2.09	\$5,766
D Other and unspecified benign neoplasm	8	0.70	0.00	2.63	\$7,942
D Secondary malignancies	7	0.61	0.00	1.71	\$6,110
D Residual codes, unclassified	5	0.43	0.00	2.60	\$8,814
P Conversion of cardiac rhythm	1,120	100.00	0.18	2.98	\$6,155
D Cardiac dysrhythmias	761	67.95	0.12	2.45	\$4,450
D Congestive heart failure, nonhypertensive	78	6.96	0.01	5.29	\$9,281
D Acute myocardial infarction	51	4.55	0.01	3.63	\$12,320
D Cardiac arrest and ventricular fibrillation	32	2.86	0.01	2.13	\$9,891
D Pneumonia (except that caused by tuberculosis or STDs)	23	2.05	0.00	4.43	\$9,407
P Genitourinary incontinence procedures	1,114	100.00	0.18	2.54	\$5,541
D Other female genital disorders	623	55.92	0.10	2.42	\$5,355
D Prolapse of female genital organs	340	30.52	0.05	2.69	\$5,626
D Other diseases of bladder and urethra	68	6.10	0.01	2.56	\$6,309
D Genitourinary symptoms and ill-defined conditions	61	5.48	0.01	2.26	\$5,377
D Complications of surgical procedures or medical care	9	0.81	0.00	2.44	\$5,593
P Other OR heart procedures	1,091	100.00	0.17	8.83	\$38,312
D Cardiac and circulatory congenital anomalies	352	32.26	0.06	12.23	\$46,543
D Acute myocardial infarction	263	24.11	0.04	7.28	\$39,431
D Cardiac dysrhythmias	106	9.72	0.02	3.10	\$13,842
D Coronary atherosclerosis and other heart disease	98	8.98	0.02	8.55	\$39,109
D Peri-, endo-, and myocarditis, cardiomyopathy (no TB or STDs)	59	5.41	0.01	8.47	\$23,970

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

**Table R-1**

**THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98**

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Enteral and parenteral nutrition	1,044	100.00	0.17	10.58	\$17,364
D Liveborn	197	18.87	0.03	14.60	\$22,939
D Acute cerebrovascular disease	81	7.76	0.01	7.63	\$12,520
D Fluid and electrolyte disorders	60	5.75	0.01	6.88	\$10,456
D Pneumonia (except that caused by tuberculosis or STDs)	55	5.27	0.01	7.98	\$14,899
D Pancreatic disorders (not diabetes)	53	5.08	0.01	10.94	\$21,138
P Other diagnostic procedures (interview, evaluation, consultation)	1,023	100.00	0.16	4.45	\$8,469
D Residual codes, unclassified	290	28.35	0.05	1.49	\$2,529
D Esophageal disorders	94	9.19	0.01	1.98	\$3,145
D Affective disorders	74	7.23	0.01	8.76	\$10,845
D Epilepsy, convulsions	64	6.26	0.01	1.38	\$2,618
D Other lower respiratory disease	46	4.50	0.01	1.76	\$3,095
P Other diagnostic ultrasound	1,022	100.00	0.16	5.20	\$6,995
D Phlebitis, thrombophlebitis and thromboembolism	308	30.14	0.05	4.88	\$5,226
D Skin and subcutaneous tissue infections	79	7.73	0.01	4.61	\$5,667
D Complications of surgical procedures or medical care	68	6.65	0.01	5.04	\$6,335
D Pneumonia (except that caused by tuberculosis or STDs)	51	4.99	0.01	5.75	\$8,036
D Congestive heart failure, nonhypertensive	41	4.01	0.01	5.05	\$9,100
P Amputation of lower extremity	1,014	100.00	0.16	9.12	\$15,610
D Diabetes mellitus with complications	513	50.59	0.08	8.52	\$13,699
D Gangrene	109	10.75	0.02	10.48	\$15,292
D Infective arthritis and osteomyelitis	94	9.27	0.01	10.09	\$7,925
D Complications of surgical procedures or medical care	43	4.24	0.01	7.23	\$13,803
D Peripheral and visceral atherosclerosis	37	3.65	0.01	9.27	\$14,586

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

Table R-1

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Thyroidectomy, partial or complete	1,013	100.00	0.16	1.78	\$5,085
D Thyroid disorders	501	49.46	0.08	1.72	\$5,006
D Cancer of thyroid	273	26.95	0.04	2.05	\$5,582
D Other and unspecified benign neoplasm	209	20.63	0.03	1.41	\$4,253
D Neoplasms of unspecified nature or uncertain behavior	11	1.09	0.00	1.73	\$6,855
D Non-Hodgkins lymphoma	5	0.49	0.00	2.60	\$7,656
P Nasogastric tube	1,011	100.00	0.16	4.72	\$7,414
D Intestinal obstruction without hernia	505	49.95	0.08	3.43	\$4,620
D Liveborn	84	8.31	0.01	12.37	\$22,052
D Complications of surgical procedures or medical care	63	6.23	0.01	4.73	\$6,247
D Gastrointestinal hemorrhage	38	3.76	0.01	3.05	\$4,937
D Poisoning by other medications and drugs	33	3.26	0.01	1.48	\$3,972
P Insertion, replacement, or removal of extracranial ventricular shun	971	100.00	0.15	6.41	\$16,051
D Complication of device, implant or graft	622	64.06	0.10	5.42	\$13,491
D Other hereditary and degenerative nervous system conditions	169	17.40	0.03	4.86	\$13,512
D Nervous system congenital anomalies	72	7.42	0.01	7.25	\$16,317
D Acute cerebrovascular disease	29	2.99	0.00	16.17	\$51,548
D Other nervous system disorders	23	2.37	0.00	5.30	\$13,624
P Other non-OR gastrointestinal therapeutic procedures	929	100.00	0.15	4.64	\$8,822
D Biliary tract disease	304	32.72	0.05	3.23	\$6,587
D Pancreatic disorders (not diabetes)	158	17.01	0.03	4.00	\$7,566
D Intestinal obstruction without hernia	88	9.47	0.01	3.84	\$5,428
D Complications of surgical procedures or medical care	83	8.93	0.01	4.08	\$7,326
D Abdominal pain	27	2.91	0.00	2.30	\$4,366

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

**Table R-1**

**THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98**

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Suture of skin and subcutaneous tissue	921	100.00	0.15	3.55	\$7,481
D Intracranial injury	217	23.56	0.03	2.78	\$7,079
D Other fractures	80	8.69	0.01	3.28	\$6,850
D Open wounds of head, neck, and trunk	78	8.47	0.01	1.78	\$5,148
D Crushing injury or internal injury	76	8.25	0.01	3.91	\$8,530
D Affective disorders	54	5.86	0.01	4.65	\$5,374
P Partial excision bone	914	100.00	0.14	4.00	\$9,854
D Other bone disease and musculoskeletal deformities	163	17.83	0.03	2.17	\$6,408
D Infective arthritis and osteomyelitis	96	10.50	0.02	5.77	\$10,993
D Other connective tissue disease	62	6.78	0.01	1.92	\$5,684
D Osteoarthritis	59	6.46	0.01	2.31	\$5,982
D Other and unspecified benign neoplasm	51	5.58	0.01	1.73	\$6,024
P Small bowel resection	912	100.00	0.14	12.59	\$28,026
D Intestinal obstruction without hernia	223	24.45	0.04	11.66	\$24,032
D Peripheral and visceral atherosclerosis	117	12.83	0.02	11.21	\$27,056
D Abdominal hernia	110	12.06	0.02	7.92	\$15,810
D Other gastrointestinal disorders	93	10.20	0.01	10.00	\$21,943
D Secondary malignancies	57	6.25	0.01	11.42	\$24,767
P Repair of cystocele and rectocele, obliteration of vaginal vault	904	100.00	0.14	2.14	\$4,777
D Prolapse of female genital organs	822	90.93	0.13	2.12	\$4,643
D Other female genital disorders	44	4.87	0.01	2.11	\$5,746
D Abdominal hernia	7	0.77	0.00	2.57	\$7,466
D Other diseases of bladder and urethra	6	0.66	0.00	2.33	\$6,047
D Other gastrointestinal disorders	5	0.55	0.00	1.60	\$6,615

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

Table R-1

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Treatment, fracture or dislocation of radius and ulna	888	100.00	0.14	2.42	\$6,722
D Fracture of upper limb	767	86.37	0.12	2.00	\$5,835
D Crushing injury or internal injury	21	2.36	0.00	5.71	\$16,696
D Intracranial injury	18	2.03	0.00	4.78	\$14,274
D Other bone disease and musculoskeletal deformities	15	1.69	0.00	2.00	\$5,765
D Other fractures	10	1.13	0.00	3.90	\$11,397
P Transurethral excision, drainage, or removal urinary obstruction	883	100.00	0.14	2.65	\$6,022
D Calculus of urinary tract	414	46.89	0.07	2.02	\$5,535
D Cancer of bladder	272	30.80	0.04	2.68	\$5,520
D Urinary tract infections	38	4.30	0.01	3.53	\$6,598
D Other diseases of bladder and urethra	34	3.85	0.01	2.62	\$5,229
D Complications of surgical procedures or medical care	16	1.81	0.00	3.06	\$6,246
P Tracheostomy, temporary and permanent	866	100.00	0.14	32.89	\$129,075
D Intracranial injury	117	13.51	0.02	25.95	\$100,509
D Respiratory failure, insufficiency, arrest (adult)	80	9.24	0.01	31.11	\$113,710
D Cancer of head and neck	42	4.85	0.01	11.93	\$36,946
D Pneumonia (except that caused by tuberculosis or STDs)	41	4.73	0.01	41.51	\$152,552
D Other upper respiratory disease	32	3.70	0.01	11.28	\$28,653
P Hemodialysis	855	100.00	0.14	5.37	\$9,188
D Diabetes mellitus with complications	79	9.24	0.01	4.34	\$7,225
D Hypertension with complications and secondary hypertension	71	8.30	0.01	4.31	\$8,089
D Pneumonia (except that caused by tuberculosis or STDs)	60	7.02	0.01	4.87	\$8,323
D Congestive heart failure, nonhypertensive	55	6.43	0.01	3.75	\$6,503
D Septicemia (except in labor)	51	5.96	0.01	5.39	\$10,223

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

**Table R-1**

**THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98**

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Diagnostic ultrasound of abdomen or retroperitoneum	846	100.00	0.13	3.63	\$5,149
D Pancreatic disorders (not diabetes)	97	11.47	0.02	4.60	\$6,947
D Urinary tract infections	66	7.80	0.01	3.36	\$4,419
D Abdominal pain	66	7.80	0.01	1.88	\$2,666
D Pneumonia (except that caused by tuberculosis or STDs)	44	5.20	0.01	4.43	\$7,084
D Biliary tract disease	41	4.85	0.01	3.02	\$4,426
P Other non-OR therapeutic procedures on skin and breast	828	100.00	0.13	7.69	\$14,364
D Skin and subcutaneous tissue infections	84	10.14	0.01	4.75	\$6,808
D Complication of device, implant or graft	79	9.54	0.01	5.53	\$12,296
D Rehabilitation care, fitting of prostheses	59	7.13	0.01	14.76	\$14,985
D Complications of surgical procedures or medical care	55	6.64	0.01	4.87	\$8,817
D Leukemias	42	5.07	0.01	17.45	\$44,400
P Other OR therapeutic procedures on musculoskeletal system	824	100.00	0.13	2.87	\$8,560
D Disorders of teeth and jaw	527	63.96	0.08	1.75	\$6,983
D Complications of surgical procedures or medical care	90	10.92	0.01	6.12	\$9,648
D Open wounds of extremities	78	9.47	0.01	3.35	\$9,540
D Other congenital anomalies	39	4.73	0.01	4.31	\$18,106
D Diabetes mellitus with complications	14	1.70	0.00	4.07	\$7,797
P Other therapeutic procedures, hemic and lymphatic system	817	100.00	0.13	4.41	\$10,257
D Secondary malignancies	148	18.12	0.02	4.28	\$8,947
D Cancer of head and neck	85	10.40	0.01	3.46	\$10,216
D Cancer of breast	74	9.06	0.01	1.49	\$3,658
D Non-Hodgkins lymphoma	66	8.08	0.01	5.45	\$11,669
D Lymphadenitis	51	6.24	0.01	3.76	\$7,607

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

Table R-1

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Other OR therapeutic procedures on respiratory system	811	100.00	0.13	8.90	\$21,706
D Pleurisy, pneumothorax, pulmonary collapse	166	20.47	0.03	9.31	\$20,111
D Other congenital anomalies	93	11.47	0.01	4.57	\$9,941
D Complications of surgical procedures or medical care	82	10.11	0.01	8.17	\$23,082
D Other upper respiratory disease	76	9.37	0.01	3.22	\$9,893
D Pneumonia (except that caused by tuberculosis or STDs)	67	8.26	0.01	11.70	\$25,648
P Skin graft	791	100.00	0.13	7.96	\$23,734
D Burns	216	27.31	0.03	10.95	\$44,266
D Chronic ulcer of skin	89	11.25	0.01	7.66	\$14,836
D Complication of device, implant or graft	54	6.83	0.01	7.11	\$16,107
D Complications of surgical procedures or medical care	49	6.19	0.01	7.61	\$13,548
D Infective arthritis and osteomyelitis	35	4.42	0.01	8.71	\$18,563
P Dilatation and curettage, aspiration after delivery or abortion	790	100.00	0.13	1.97	\$4,387
D Other complications of birth	231	29.24	0.04	2.29	\$4,851
D Other complications of pregnancy	207	26.20	0.03	1.44	\$3,584
D Spontaneous abortion	138	17.47	0.02	1.61	\$3,649
D Trauma to perineum and vulva	31	3.92	0.00	1.77	\$3,628
D Polyhydramnios and other problems of amniotic cavity	28	3.54	0.00	2.96	\$5,363
P Therapeutic radiology	788	100.00	0.12	3.44	\$7,025
D Cancer of thyroid	161	20.43	0.03	1.66	\$3,041
D Maintenance chemotherapy, radiotherapy	151	19.16	0.02	3.08	\$4,577
D Cancer of prostate	134	17.01	0.02	1.75	\$10,349
D Cancer of cervix	90	11.42	0.01	2.21	\$6,605
D Secondary malignancies	76	9.64	0.01	6.39	\$7,761

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.

**Table R-1**

**THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY PROCEDURES WERE PERFORMED AND THEIR ASSOCIATED PRIMARY DIAGNOSES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98**

Most Frequent 100 Primary Procedures with Top 5 Primary Diagnoses	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
P Other operations on ovary	784	100.00	0.12	2.48	\$5,463
D Ovarian cyst	342	43.62	0.05	2.26	\$5,035
D Endometriosis	115	14.67	0.02	2.43	\$5,466
D Other and unspecified benign neoplasm	112	14.29	0.02	2.71	\$5,370
D Inflammatory diseases of female pelvic organs	72	9.18	0.01	2.68	\$5,767
D Other female genital disorders	47	5.99	0.01	2.55	\$5,507
P Abdominal paracentesis	732	100.00	0.12	6.63	\$11,440
D Liver disease, alcohol-related	130	17.76	0.02	6.75	\$10,766
D Complications of surgical procedures or medical care	110	15.03	0.02	5.52	\$9,902
D Other liver diseases	109	14.89	0.02	6.17	\$9,474
D Peritonitis and intestinal abscess	71	9.70	0.01	7.23	\$13,628
D Secondary malignancies	31	4.23	0.00	5.13	\$7,722
P Peripheral vascular bypass	700	100.00	0.11	8.02	\$20,545
D Peripheral and visceral atherosclerosis	267	38.14	0.04	6.19	\$16,807
D Aortic and peripheral arterial embolism or thrombosis	125	17.86	0.02	8.94	\$18,336
D Diabetes mellitus with complications	90	12.86	0.01	8.24	\$20,042
D Aortic, peripheral, and visceral artery aneurysms	79	11.29	0.01	10.14	\$31,617
D Complication of device, implant or graft	42	6.00	0.01	11.86	\$30,640
P Inguinal and femoral hernia repair	659	100.00	0.10	4.81	\$11,105
D Abdominal hernia	580	88.01	0.09	2.46	\$5,745
D Liveborn	12	1.82	0.00	64.92	\$158,976
D Complications of surgical procedures or medical care	8	1.21	0.00	9.63	\$22,227
D Congestive heart failure, nonhypertensive	5	0.76	0.00	5.40	\$9,031
D Other complications of pregnancy	5	0.76	0.00	2.00	\$4,140

\*Note: The shaded lines represent the principal procedures and the lines following represent associated principal diagnoses.



Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Liveborn	125,321	100.00	19.85	2.45	\$2,672
P No procedure	53,771	42.91	8.52	1.87	\$1,259
P Circumcision	37,080	29.59	5.87	1.78	\$1,098
P Prophylactic vaccinations and inoculations	27,441	21.90	4.35	1.66	\$977
P Respiratory intubation and mechanical ventilation	2,270	1.81	0.36	20.23	\$46,478
P Other vascular catheterization, not heart	1,063	0.85	0.17	11.19	\$21,994
D Normal pregnancy and/or delivery	21,465	100.00	3.40	1.47	\$2,475
P Episiotomy	10,630	49.52	1.68	1.42	\$2,381
P Other procedures to assist delivery	6,039	28.13	0.96	1.40	\$2,344
P Artificial rupture of membranes to assist delivery	2,271	10.58	0.36	1.42	\$2,347
P Ligation of fallopian tubes	966	4.50	0.15	1.61	\$3,349
P No procedure	363	1.69	0.06	1.40	\$1,711
D Trauma to perineum and vulva	20,705	100.00	3.28	1.48	\$2,573
P Repair of current obstetric laceration	13,261	64.05	2.10	1.46	\$2,482
P Other procedures to assist delivery	2,824	13.64	0.45	1.49	\$2,635
P Artificial rupture of membranes to assist delivery	1,335	6.45	0.21	1.44	\$2,613
P Forceps, vacuum, and breech delivery	1,221	5.90	0.19	1.64	\$2,929
P Episiotomy	749	3.62	0.12	1.50	\$2,527
D Pneumonia (except that caused by tuberculosis or STDs)	17,736	100.00	2.81	5.02	\$8,851
P No procedure	13,056	73.61	2.07	4.05	\$5,889
P Other respiratory therapy	744	4.19	0.12	4.20	\$5,312
P Respiratory intubation and mechanical ventilation	590	3.33	0.09	12.50	\$42,743
P Diagnostic bronchoscopy and biopsy of bronchus	355	2.00	0.06	8.56	\$16,563
P Incision of pleura, thoracentesis, chest drainage	313	1.76	0.05	7.67	\$13,037

\*Note: The shaded lines represent the principal diagnoses and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES  
FOR TOP 100 PRIMARY DIAGNOSES AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Coronary atherosclerosis and other heart disease	14,779	100.00	2.34	3.90	\$18,343
P Percutaneous transluminal coronary angioplasty (PTCA)	4,644	31.42	0.74	2.10	\$17,287
P Coronary artery bypass graft (CABG)	3,507	23.73	0.56	7.75	\$34,253
P Diagnostic cardiac catheterization, coronary arteriography	2,905	19.66	0.46	2.69	\$9,807
P No procedure	2,321	15.70	0.37	2.33	\$4,259
P Cardiac stress tests	298	2.02	0.05	2.12	\$4,898
D Other complications of birth	14,158	100.00	2.24	1.82	\$3,153
P Other procedures to assist delivery	3,220	22.74	0.51	1.49	\$2,596
P Episiotomy	2,798	19.76	0.44	1.46	\$2,484
P Forceps, vacuum, and breech delivery	2,092	14.78	0.33	1.61	\$2,822
P Repair of current obstetric laceration	2,023	14.29	0.32	1.51	\$2,628
P Cesarean section	972	6.87	0.15	3.48	\$5,757
D Umbilical cord complication	13,512	100.00	2.14	1.48	\$2,535
P Episiotomy	4,764	35.26	0.75	1.40	\$2,363
P Other procedures to assist delivery	3,135	23.20	0.50	1.41	\$2,440
P Repair of current obstetric laceration	1,618	11.97	0.26	1.45	\$2,402
P Forceps, vacuum, and breech delivery	1,383	10.24	0.22	1.57	\$2,693
P Artificial rupture of membranes to assist delivery	1,240	9.18	0.20	1.47	\$2,473
D Affective disorders	13,276	100.00	2.10	7.68	\$7,670
P No procedure	9,341	70.36	1.48	6.89	\$6,817
P Psychological and psychiatric evaluation and therapy	3,219	24.25	0.51	9.69	\$10,104
P Alcohol and drug rehabilitation/detoxification	299	2.25	0.05	6.84	\$6,822
P Other diagnostic procedures (interview, evaluation, consultation)	74	0.56	0.01	8.76	\$10,845
P Magnetic resonance imaging	55	0.41	0.01	11.91	\$13,270

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES  
FOR TOP 100 PRIMARY DIAGNOSES AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Spondylosis, intervertebral disc disorders, back problems	11,307	100.00	1.79	2.83	\$8,611
P Laminectomy, excision intervertebral disc	6,259	55.36	0.99	2.62	\$6,998
P Spinal fusion	3,622	32.03	0.57	2.81	\$12,448
P No procedure	771	6.82	0.12	3.64	\$4,216
P Insertion of catheter or spinal stimulator and injection into spinal	141	1.25	0.02	3.40	\$6,678
P Magnetic resonance imaging	112	0.99	0.02	3.12	\$4,176
D Osteoarthritis	10,144	100.00	1.61	4.26	\$15,539
P Arthroplasty knee	5,493	54.15	0.87	4.11	\$17,367
P Hip replacement, total and partial	2,808	27.68	0.44	4.17	\$17,177
P No procedure	1,082	10.67	0.17	6.35	\$6,695
P Arthroplasty other than hip or knee	300	2.96	0.05	2.58	\$10,717
P Other OR therapeutic procedures on joints	184	1.81	0.03	2.22	\$6,962
D Fetal distress and abnormal forces of labor	9,896	100.00	1.57	2.01	\$3,446
P Cesarean section	2,640	26.68	0.42	3.31	\$5,597
P Forceps, vacuum, and breech delivery	2,491	25.17	0.39	1.64	\$2,931
P Episiotomy	1,517	15.33	0.24	1.43	\$2,387
P Other procedures to assist delivery	1,326	13.40	0.21	1.44	\$2,406
P Repair of current obstetric laceration	1,031	10.42	0.16	1.50	\$2,541
D Acute myocardial infarction	8,792	100.00	1.39	4.93	\$19,483
P Percutaneous transluminal coronary angioplasty (PTCA)	2,695	30.65	0.43	4.17	\$22,390
P Diagnostic cardiac catheterization, coronary arteriography	1,917	21.80	0.30	4.06	\$13,626
P No procedure	1,570	17.86	0.25	3.56	\$6,606
P Coronary artery bypass graft (CABG)	863	9.82	0.14	9.81	\$42,756
P Other therapeutic procedures	407	4.63	0.06	2.95	\$8,632

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Previous C-section	8,743	100.00	1.38	2.42	\$3,915
P Cesarean section	5,836	66.75	0.92	2.85	\$4,492
P Episiotomy	932	10.66	0.15	1.46	\$2,632
P Other procedures to assist delivery	551	6.30	0.09	1.52	\$2,668
P Repair of current obstetric laceration	481	5.50	0.08	1.56	\$2,685
P Forceps, vacuum, and breech delivery	410	4.69	0.06	1.66	\$2,874
D Congestive heart failure, nonhypertensive	7,850	100.00	1.24	5.03	\$9,385
P No procedure	4,639	59.10	0.73	4.12	\$5,663
P Diagnostic ultrasound of heart (echocardiogram)	618	7.87	0.10	4.38	\$7,324
P Diagnostic cardiac catheterization, coronary arteriography	552	7.03	0.09	6.16	\$15,523
P Incision of pleura, thoracentesis, chest drainage	203	2.59	0.03	5.57	\$8,950
P Blood transfusion	147	1.87	0.02	5.56	\$9,180
D Complication of device, implant or graft	7,734	100.00	1.22	5.04	\$15,227
P Hip replacement, total and partial	932	12.05	0.15	5.05	\$18,616
P No procedure	765	9.89	0.12	4.62	\$6,279
P Arthroplasty knee	651	8.42	0.10	4.52	\$15,470
P Insertion, replacement, or removal of extracranial ventricular shun	622	8.04	0.10	5.42	\$13,491
P Other OR procedures on vessels other than head and neck	413	5.34	0.07	5.19	\$16,182
D Biliary tract disease	7,572	100.00	1.20	3.46	\$8,712
P Cholecystectomy and common duct exploration	6,078	80.27	0.96	3.33	\$8,759
P No procedure	607	8.02	0.10	2.66	\$4,107
P Other non-OR gastrointestinal therapeutic procedures	304	4.01	0.05	3.23	\$6,587
P Other OR gastrointestinal therapeutic procedures	121	1.60	0.02	9.70	\$22,748
P Endoscopic retrograde cannulation of pancreas (ERCP)	100	1.32	0.02	3.60	\$7,392

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Other complications of pregnancy	7,330	100.00	1.16	2.07	\$3,284
P No procedure	1,872	25.54	0.30	2.30	\$2,726
P Episiotomy	1,452	19.81	0.23	1.49	\$2,478
P Other procedures to assist delivery	1,138	15.53	0.18	1.55	\$2,739
P Repair of current obstetric laceration	391	5.33	0.06	1.61	\$2,668
P Forceps, vacuum, and breech delivery	389	5.31	0.06	1.74	\$2,891
D Acute cerebrovascular disease	7,221	100.00	1.14	6.01	\$10,793
P No procedure	3,475	48.12	0.55	5.88	\$7,746
P Computerized axial tomography (CT) scan head	1,029	14.25	0.16	3.90	\$6,820
P Diagnostic ultrasound of heart (echocardiogram)	370	5.12	0.06	4.22	\$8,045
P Incision and excision of CNS	316	4.38	0.05	7.33	\$21,450
P Magnetic resonance imaging	287	3.97	0.05	5.10	\$8,192
D Appendicitis and other appendiceal conditions	6,892	100.00	1.09	2.80	\$6,078
P Appendectomy	6,307	91.51	1.00	2.64	\$5,795
P No procedure	324	4.70	0.05	2.42	\$4,600
P Excision, lysis peritoneal adhesions	100	1.45	0.02	6.58	\$12,061
P Colorectal resection	82	1.19	0.01	8.10	\$18,902
P Other OR lower GI therapeutic procedures	26	0.38	0.00	7.92	\$14,931
D Complications of surgical procedures or medical care	6,870	100.00	1.09	5.26	\$10,056
P No procedure	2,240	32.61	0.35	3.60	\$4,594
P Debridement of wound, infection or burn	443	6.45	0.07	7.55	\$15,034
P Other OR gastrointestinal therapeutic procedures	251	3.65	0.04	9.32	\$20,545
P Other vascular catheterization, not heart	167	2.43	0.03	5.99	\$10,179
P Incision and drainage, skin and subcutaneous tissue	151	2.20	0.02	3.95	\$7,084

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Nonspecific chest pain	6,097	100.00	0.97	1.63	\$4,719
P No procedure	3,154	51.73	0.50	1.43	\$3,451
P Diagnostic cardiac catheterization, coronary arteriography	1,383	22.68	0.22	1.93	\$7,596
P Cardiac stress tests	816	13.38	0.13	1.47	\$4,380
P Diagnostic ultrasound of heart (echocardiogram)	159	2.61	0.03	1.65	\$4,628
P Radioisotope scan and function studies	134	2.20	0.02	1.78	\$4,744
D Cardiac dysrhythmias	6,037	100.00	0.96	2.89	\$8,443
P No procedure	2,631	43.58	0.42	2.47	\$4,102
P Insertion, revision, replacement, removal of cardiac pacemaker orca	1,065	17.64	0.17	3.25	\$20,673
P Conversion of cardiac rhythm	761	12.61	0.12	2.45	\$4,450
P Diagnostic ultrasound of heart (echocardiogram)	361	5.98	0.06	2.62	\$4,987
P Other diagnostic cardiovascular procedures	308	5.10	0.05	2.97	\$10,083
D Malposition, malpresentation	5,751	100.00	0.91	2.47	\$4,032
P Cesarean section	3,431	59.66	0.54	3.07	\$4,852
P Forceps, vacuum, and breech delivery	971	16.88	0.15	1.63	\$2,940
P Other procedures to assist delivery	497	8.64	0.08	1.55	\$2,758
P Episiotomy	308	5.36	0.05	1.50	\$2,498
P Repair of current obstetric laceration	220	3.83	0.03	1.46	\$2,676
D Fluid and electrolyte disorders	5,694	100.00	0.90	3.19	\$4,247
P No procedure	4,542	79.77	0.72	2.77	\$3,337
P Upper gastrointestinal endoscopy, biopsy	155	2.72	0.02	4.52	\$6,503
P Computerized axial tomography (CT) scan head	82	1.44	0.01	3.74	\$5,370
P Diagnostic spinal tap	69	1.21	0.01	3.20	\$5,616
P Colonoscopy and biopsy	67	1.18	0.01	5.06	\$6,733

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Rehabilitation care, fitting of prostheses	5,579	100.00	0.88	14.38	\$18,119
P No procedure	3,414	61.19	0.54	10.93	\$12,014
P Physical therapy exercises, manipulation, and other procedures	791	14.18	0.13	16.79	\$23,755
P Other physical therapy and rehabilitation	564	10.11	0.09	19.15	\$25,886
P Gastrostomy, temporary and permanent	63	1.13	0.01	24.08	\$36,764
P Other non-OR therapeutic procedures on skin and breast	59	1.06	0.01	14.76	\$14,985
D Early or threatened labor	5,309	100.00	0.84	2.74	\$3,930
P No procedure	1,426	26.86	0.23	2.75	\$3,306
P Other procedures to assist delivery	839	15.80	0.13	2.03	\$3,351
P Episiotomy	813	15.31	0.13	1.80	\$2,836
P Cesarean section	532	10.02	0.08	4.81	\$7,502
P Repair of current obstetric laceration	453	8.53	0.07	2.17	\$3,315
D Fracture of neck of femur (hip)	5,220	100.00	0.83	6.05	\$12,436
P Treatment, fracture or dislocation of hip and femur	2,722	52.15	0.43	4.99	\$11,312
P Hip replacement, total and partial	1,461	27.99	0.23	5.49	\$15,814
P No procedure	877	16.80	0.14	9.55	\$9,447
P Other fracture and dislocation procedure	18	0.34	0.00	15.06	\$14,983
P Blood transfusion	18	0.34	0.00	9.56	\$12,617
D Hypertension complicating pregnancy, childbirth and the puerperium	5,218	100.00	0.83	2.60	\$4,439
P Other procedures to assist delivery	1,149	22.02	0.18	2.11	\$3,933
P Cesarean section	976	18.70	0.15	4.37	\$7,391
P Episiotomy	899	17.23	0.14	1.97	\$3,422
P Repair of current obstetric laceration	603	11.56	0.10	2.26	\$3,865
P Forceps, vacuum, and breech delivery	588	11.27	0.09	2.27	\$4,068

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Diabetes mellitus with complications	5,147	100.00	0.82	4.53	\$8,275
P No procedure	3,109	60.40	0.49	2.91	\$4,214
P Amputation of lower extremity	513	9.97	0.08	8.52	\$13,699
P Debridement of wound, infection or burn	228	4.43	0.04	7.88	\$12,120
P Upper gastrointestinal endoscopy, biopsy	95	1.85	0.02	6.15	\$9,883
P Kidney transplant	95	1.85	0.02	10.60	\$63,865
D Forceps delivery	5,136	100.00	0.81	1.60	\$2,634
P Forceps, vacuum, and breech delivery	3,907	76.07	0.62	1.57	\$2,597
P Artificial rupture of membranes to assist delivery	405	7.89	0.06	1.73	\$2,518
P Other procedures to assist delivery	253	4.93	0.04	1.66	\$2,617
P Repair of current obstetric laceration	217	4.23	0.03	1.58	\$2,909
P Ligation of fallopian tubes	182	3.54	0.03	1.76	\$3,327
D Fracture of lower limb	5,113	100.00	0.81	3.86	\$9,495
P Treatment, fracture or dislocation of lower extremity (other than h	3,088	60.40	0.49	2.93	\$7,618
P Treatment, fracture or dislocation of hip and femur	858	16.78	0.14	5.20	\$14,428
P No procedure	490	9.58	0.08	4.56	\$5,597
P Debridement of wound, infection or burn	148	2.89	0.02	6.82	\$19,607
P Traction, splints, and other wound care	125	2.44	0.02	5.87	\$6,753
D Polyhydramnios and other problems of amniotic cavity	5,064	100.00	0.80	2.60	\$3,992
P Other procedures to assist delivery	1,170	23.10	0.19	2.20	\$3,624
P Episiotomy	1,127	22.26	0.18	1.80	\$2,970
P Cesarean section	777	15.34	0.12	4.99	\$7,151
P Repair of current obstetric laceration	717	14.16	0.11	2.06	\$3,352
P Forceps, vacuum, and breech delivery	588	11.61	0.09	1.95	\$3,328

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.



Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures

	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Fracture of lower limb	5,113	100.00	0.81	3.86	\$9,495
P Treatment, fracture or dislocation of lower extremity (other than h	3,088	60.40	0.49	2.93	\$7,618
P Treatment, fracture or dislocation of hip and femur	858	16.78	0.14	5.20	\$14,428
P No procedure	490	9.58	0.08	4.56	\$5,597
P Debridement of wound, infection or burn	148	2.89	0.02	6.82	\$19,607
P Traction, splints, and other wound care	125	2.44	0.02	5.87	\$6,753
D Polyhydramnios and other problems of amniotic cavity	5,064	100.00	0.80	2.60	\$3,992
P Other procedures to assist delivery	1,170	23.10	0.19	2.20	\$3,624
P Episiotomy	1,127	22.26	0.18	1.80	\$2,970
P Cesarean section	777	15.34	0.12	4.99	\$7,151
P Repair of current obstetric laceration	717	14.16	0.11	2.06	\$3,352
P Forceps, vacuum, and breech delivery	588	11.61	0.09	1.95	\$3,328
D Prolapse of female genital organs	5,009	100.00	0.79	2.56	\$5,581
P Hysterectomy, abdominal and vaginal	3,012	60.13	0.48	2.64	\$5,780
P Repair of cystocele and rectocele, obliteration of vaginal vault	822	16.41	0.13	2.12	\$4,643
P Other OR therapeutic procedures, female organs	614	12.26	0.10	2.50	\$5,541
P Genitourinary incontinence procedures	340	6.79	0.05	2.69	\$5,626
P Oophorectomy, unilateral and bilateral	101	2.02	0.02	3.07	\$6,619
D Gastrointestinal hemorrhage	4,817	100.00	0.76	3.88	\$7,893
P Upper gastrointestinal endoscopy, biopsy	1,786	37.08	0.28	3.12	\$6,216
P Other non-OR upper GI therapeutic procedures	1,063	22.07	0.17	3.54	\$7,100
P No procedure	670	13.91	0.11	3.39	\$4,001
P Blood transfusion	545	11.31	0.09	3.46	\$6,157
P Colonoscopy and biopsy	193	4.01	0.03	3.15	\$5,714

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Intestinal obstruction without hernia	4,511	100.00	0.71	5.59	\$9,528
P No procedure	1,967	43.60	0.31	3.22	\$3,986
P Excision, lysis peritoneal adhesions	600	13.30	0.10	8.98	\$15,927
P Nasogastric tube	505	11.19	0.08	3.43	\$4,620
P Small bowel resection	223	4.94	0.04	11.66	\$24,032
P Other OR lower GI therapeutic procedures	205	4.54	0.03	10.42	\$20,766
D Urinary tract infections	4,450	100.00	0.70	3.53	\$4,919
P No procedure	3,213	72.20	0.51	3.14	\$4,013
P Diagnostic spinal tap	179	4.02	0.03	3.00	\$4,591
P Intravenous pyelogram	79	1.78	0.01	3.18	\$4,255
P Diagnostic ultrasound of urinary tract	66	1.48	0.01	3.05	\$3,990
P Diagnostic ultrasound of abdomen or retroperitoneum	66	1.48	0.01	3.36	\$4,419
D Fetopelvic disproportion, obstruction	4,285	100.00	0.68	2.53	\$4,264
P Cesarean section	2,552	59.56	0.40	3.16	\$5,315
P Forceps, vacuum, and breech delivery	717	16.73	0.11	1.67	\$2,831
P Episiotomy	355	8.28	0.06	1.52	\$2,462
P Other procedures to assist delivery	274	6.39	0.04	1.53	\$2,626
P Repair of current obstetric laceration	198	4.62	0.03	1.51	\$2,536
D Acute bronchitis	4,218	100.00	0.67	3.41	\$5,049
P No procedure	3,600	85.35	0.57	3.07	\$4,063
P Other respiratory therapy	219	5.19	0.03	3.00	\$4,017
P Diagnostic spinal tap	174	4.13	0.03	3.59	\$5,238
P Respiratory intubation and mechanical ventilation	87	2.06	0.01	12.56	\$31,621
P Diagnostic ultrasound of heart (echocardiogram)	16	0.38	0.00	5.06	\$14,678

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Asthma	4,148	100.00	0.66	2.99	\$4,632
P No procedure	3,552	85.63	0.56	2.78	\$4,036
P Other respiratory therapy	282	6.80	0.04	2.90	\$3,517
P Respiratory intubation and mechanical ventilation	87	2.10	0.01	6.59	\$18,391
P Diagnostic ultrasound of heart (echocardiogram)	26	0.63	0.00	4.38	\$7,907
P Radioisotope pulmonary scan	24	0.58	0.00	3.42	\$5,849
D Septicemia (except in labor)	4,057	100.00	0.64	6.57	\$13,950
P No procedure	1,952	48.11	0.31	4.57	\$6,755
P Other vascular catheterization, not heart	214	5.27	0.03	6.63	\$15,679
P Diagnostic spinal tap	197	4.86	0.03	4.08	\$6,817
P Blood transfusion	184	4.54	0.03	7.01	\$13,347
P Diagnostic ultrasound of heart (echocardiogram)	113	2.79	0.02	6.86	\$12,105
D Skin and subcutaneous tissue infections	3,842	100.00	0.61	4.39	\$5,940
P No procedure	2,205	57.39	0.35	3.78	\$4,336
P Incision and drainage, skin and subcutaneous tissue	309	8.04	0.05	4.69	\$6,607
P Debridement of wound, infection or burn	274	7.13	0.04	6.58	\$11,327
P Other vascular catheterization, not heart	147	3.83	0.02	5.35	\$7,744
P Other therapeutic procedures	102	2.65	0.02	3.94	\$4,088
D Alcohol-related mental disorders	3,732	100.00	0.59	6.44	\$4,531
P Alcohol and drug rehabilitation/detoxification	2,142	57.40	0.34	6.54	\$3,563
P No procedure	1,253	33.57	0.20	6.39	\$5,536
P Psychological and psychiatric evaluation and therapy	216	5.79	0.03	5.69	\$5,495
P Respiratory intubation and mechanical ventilation	25	0.67	0.00	2.44	\$8,180
P Suture of skin and subcutaneous tissue	14	0.38	0.00	5.14	\$6,385

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Menstrual disorders	3,701	100.00	0.59	2.51	\$5,507
P Hysterectomy, abdominal and vaginal	3,483	94.11	0.55	2.55	\$5,605
P No procedure	72	1.95	0.01	1.96	\$3,227
P Diagnostic dilatation and curettage (D and C)	52	1.41	0.01	1.42	\$3,463
P Other operations on ovary	17	0.46	0.00	2.24	\$5,911
P Oophorectomy, unilateral and bilateral	16	0.43	0.00	2.81	\$5,446
D Chronic obstructive pulmonary disease and bronchiectasis	3,179	100.00	0.50	4.78	\$8,220
P No procedure	2,253	70.87	0.36	4.23	\$5,931
P Other respiratory therapy	249	7.83	0.04	4.70	\$5,095
P Respiratory intubation and mechanical ventilation	108	3.40	0.02	10.23	\$28,661
P Diagnostic ultrasound of heart (echocardiogram)	54	1.70	0.01	4.09	\$7,114
P Other therapeutic procedures	50	1.57	0.01	4.34	\$4,980
D Substance-related mental disorders	3,163	100.00	0.50	6.45	\$5,375
P No procedure	1,499	47.39	0.24	6.82	\$6,188
P Alcohol and drug rehabilitation/detoxification	1,338	42.30	0.21	6.07	\$4,047
P Psychological and psychiatric evaluation and therapy	244	7.71	0.04	6.23	\$6,028
P Diagnostic spinal tap	11	0.35	0.00	4.73	\$11,337
P Computerized axial tomography (CT) scan head	9	0.28	0.00	4.44	\$4,870
D Phlebitis, thrombophlebitis and thromboembolism	3,096	100.00	0.49	5.08	\$6,253
P No procedure	1,876	60.59	0.30	4.78	\$4,946
P Other therapeutic procedures	441	14.24	0.07	4.98	\$5,592
P Other diagnostic ultrasound	308	9.95	0.05	4.88	\$5,226
P Other OR procedures on vessels other than head and neck	112	3.62	0.02	6.30	\$18,323
P Radioisotope pulmonary scan	54	1.74	0.01	4.89	\$5,868

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Other fractures	2,998	100.00	0.47	4.84	\$9,586
P No procedure	1,674	55.84	0.27	4.02	\$5,019
P Spinal fusion	147	4.90	0.02	6.31	\$22,943
P Other fracture and dislocation procedure	145	4.84	0.02	7.17	\$19,918
P Other OR therapeutic nervous system procedures	102	3.40	0.02	5.55	\$18,184
P Suture of skin and subcutaneous tissue	80	2.67	0.01	3.28	\$6,850
D Intracranial injury	2,974	100.00	0.47	6.17	\$18,122
P No procedure	957	32.18	0.15	3.95	\$6,274
P Incision and excision of CNS	389	13.08	0.06	7.85	\$26,747
P Computerized axial tomography (CT) scan head	339	11.40	0.05	3.10	\$7,021
P Suture of skin and subcutaneous tissue	217	7.30	0.03	2.78	\$7,079
P Respiratory intubation and mechanical ventilation	140	4.71	0.02	5.32	\$18,783
D Pancreatic disorders (not diabetes)	2,912	100.00	0.46	6.23	\$12,585
P No procedure	1,195	41.04	0.19	3.98	\$5,489
P Cholecystectomy and common duct exploration	460	15.80	0.07	5.55	\$12,571
P CT scan abdomen	170	5.84	0.03	5.70	\$8,572
P Other OR gastrointestinal therapeutic procedures	162	5.56	0.03	15.90	\$39,311
P Other non-OR gastrointestinal therapeutic procedures	158	5.43	0.03	4.00	\$7,566
D Schizophrenia and related disorders	2,838	100.00	0.45	13.34	\$13,033
P No procedure	1,867	65.79	0.30	12.02	\$11,635
P Psychological and psychiatric evaluation and therapy	851	29.99	0.13	16.20	\$17,502
P Alcohol and drug rehabilitation/detoxification	30	1.06	0.00	8.33	\$8,498
P Other diagnostic procedures (interview, evaluation, consultation)	16	0.56	0.00	20.25	\$20,923
P Other therapeutic procedures	11	0.39	0.00	12.00	\$10,118

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Other female genital disorders	2,835	100.00	0.45	2.65	\$5,778
P Hysterectomy, abdominal and vaginal	1,545	54.50	0.24	2.68	\$5,855
P Genitourinary incontinence procedures	623	21.98	0.10	2.42	\$5,355
P Oophorectomy, unilateral and bilateral	191	6.74	0.03	2.93	\$5,987
P Other OR therapeutic procedures, female organs	91	3.21	0.01	2.75	\$6,569
P No procedure	75	2.65	0.01	2.13	\$3,105
D Maintenance chemotherapy, radiotherapy	2,810	100.00	0.45	3.60	\$8,121
P Cancer chemotherapy	2,305	82.03	0.37	3.36	\$7,362
P Therapeutic radiology	151	5.37	0.02	3.08	\$4,577
P Other vascular catheterization, not heart	120	4.27	0.02	5.09	\$15,367
P No procedure	78	2.78	0.01	3.36	\$8,159
P Insertion of catheter or spinal stimulator and injection into spina	39	1.39	0.01	3.77	\$8,109
D Esophageal disorders	2,616	100.00	0.41	3.47	\$8,185
P Other OR upper GI therapeutic procedures	973	37.19	0.15	4.42	\$11,666
P No procedure	523	19.99	0.08	2.15	\$3,510
P Upper gastrointestinal endoscopy, biopsy	442	16.90	0.07	3.17	\$5,833
P Diagnostic cardiac catheterization, coronary arteriography	138	5.28	0.02	2.33	\$8,044
P Other diagnostic procedures (interview, evaluation, consultation)	94	3.59	0.01	1.98	\$3,145
D Other and unspecified benign neoplasm	2,590	100.00	0.41	3.83	\$10,264
P Other therapeutic endocrine procedures	342	13.20	0.05	3.44	\$10,050
P Oophorectomy, unilateral and bilateral	270	10.42	0.04	2.89	\$5,756
P Incision and excision of CNS	257	9.92	0.04	5.42	\$19,648
P Thyroidectomy, partial or complete	209	8.07	0.03	1.41	\$4,253
P Other OR therapeutic nervous system procedures	193	7.45	0.03	4.70	\$15,406

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Abdominal hernia	2,544	100.00	0.40	3.93	\$8,728
P Other hernia repair	1,269	49.88	0.20	3.51	\$7,439
P Inguinal and femoral hernia repair	580	22.80	0.09	2.46	\$5,745
P No procedure	155	6.09	0.02	3.12	\$4,918
P Other OR upper GI therapeutic procedures	146	5.74	0.02	5.12	\$13,028
P Excision, lysis peritoneal adhesions	111	4.36	0.02	5.44	\$10,123
D Benign neoplasm of uterus	2,536	100.00	0.40	2.72	\$5,837
P Hysterectomy, abdominal and vaginal	2,338	92.19	0.37	2.72	\$5,846
P Other excision of cervix and uterus	146	5.76	0.02	2.76	\$5,784
P No procedure	22	0.87	0.00	2.68	\$4,946
P Oophorectomy, unilateral and bilateral	9	0.35	0.00	2.89	\$5,535
P Other operations on ovary	6	0.24	0.00	2.00	\$5,715
D Diverticulosis and diverticulitis	2,516	100.00	0.40	4.96	\$9,168
P No procedure	938	37.28	0.15	3.46	\$4,578
P Colorectal resection	669	26.59	0.11	8.34	\$17,487
P Colonoscopy and biopsy	331	13.16	0.05	3.15	\$6,308
P Upper gastrointestinal endoscopy, biopsy	128	5.09	0.02	3.51	\$6,969
P CT scan abdomen	98	3.90	0.02	3.77	\$5,437
D Fracture of upper limb	2,415	100.00	0.38	2.70	\$7,049
P Other fracture and dislocation procedure	865	35.82	0.14	2.41	\$6,648
P Treatment, fracture or dislocation of radius and ulna	767	31.76	0.12	2.00	\$5,835
P No procedure	261	10.81	0.04	3.52	\$4,622
P Arthroplasty other than hip or knee	115	4.76	0.02	4.13	\$12,817
P Debridement of wound, infection or burn	93	3.85	0.01	4.03	\$10,607

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

**Table R-2**

**THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98**

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Secondary malignancies	2,411	100.00	0.38	6.26	\$13,421
P No procedure	502	20.82	0.08	4.38	\$5,763
P Incision of pleura, thoracentesis, chest drainage	150	6.22	0.02	4.78	\$7,948
P Other therapeutic procedures, hemic and lymphatic system	148	6.14	0.02	4.28	\$8,947
P Other OR gastrointestinal therapeutic procedures	124	5.14	0.02	7.49	\$18,879
P Therapeutic radiology	76	3.15	0.01	6.39	\$7,761
D Endometriosis	2,369	100.00	0.38	2.65	\$5,688
P Hysterectomy, abdominal and vaginal	1,968	83.07	0.31	2.68	\$5,702
P Oophorectomy, unilateral and bilateral	137	5.78	0.02	2.60	\$5,348
P Other operations on ovary	115	4.85	0.02	2.43	\$5,466
P Other excision of cervix and uterus	37	1.56	0.01	2.19	\$5,699
P No procedure	25	1.06	0.00	2.08	\$4,367
D Respiratory failure, insufficiency, arrest (adult)	2,352	100.00	0.37	8.35	\$23,264
P No procedure	944	40.14	0.15	4.87	\$7,388
P Respiratory intubation and mechanical ventilation	816	34.69	0.13	10.12	\$33,782
P Diagnostic bronchoscopy and biopsy of bronchus	85	3.61	0.01	8.91	\$22,482
P Tracheostomy, temporary and permanent	80	3.40	0.01	31.11	\$113,710
P Other respiratory therapy	45	1.91	0.01	3.51	\$6,237
D Other mental conditions	2,223	100.00	0.35	5.64	\$5,632
P No procedure	1,577	70.94	0.25	5.34	\$5,237
P Psychological and psychiatric evaluation and therapy	502	22.58	0.08	6.56	\$6,576
P Alcohol and drug rehabilitation/detoxification	50	2.25	0.01	4.08	\$4,399
P Other diagnostic procedures (interview, evaluation, consultation)	13	0.58	0.00	5.00	\$5,611
P Enteral and parenteral nutrition	12	0.54	0.00	11.17	\$12,837

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.



Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Other gastrointestinal disorders	2,213	100.00	0.35	5.72	\$10,896
P No procedure	538	24.31	0.09	3.20	\$3,800
P Other OR lower GI therapeutic procedures	405	18.30	0.06	7.62	\$14,540
P Colorectal resection	309	13.96	0.05	9.57	\$20,316
P Excision, lysis peritoneal adhesions	151	6.82	0.02	5.15	\$10,988
P Upper gastrointestinal endoscopy, biopsy	130	5.87	0.02	4.01	\$7,065
D Epilepsy, convulsions	2,184	100.00	0.35	3.11	\$5,831
P No procedure	1,369	62.68	0.22	2.80	\$4,592
P Diagnostic spinal tap	218	9.98	0.03	3.14	\$6,415
P Computerized axial tomography (CT) scan head	125	5.72	0.02	2.74	\$5,089
P Respiratory intubation and mechanical ventilation	76	3.48	0.01	5.30	\$13,087
P Electroencephalogram (EEG)	75	3.43	0.01	2.25	\$4,438
D Other connective tissue disease	2,176	100.00	0.34	2.99	\$7,108
P Arthroplasty other than hip or knee	559	25.69	0.09	1.67	\$4,613
P Other therapeutic procedures on muscles and tendons	528	24.26	0.08	2.56	\$5,713
P No procedure	368	16.91	0.06	3.36	\$4,218
P Other OR therapeutic procedures on joints	229	10.52	0.04	1.87	\$5,414
P Partial excision bone	62	2.85	0.01	1.92	\$5,684
D Abdominal pain	2,163	100.00	0.34	2.25	\$3,993
P No procedure	1,220	56.40	0.19	1.93	\$2,957
P Appendectomy	276	12.76	0.04	1.83	\$5,070
P Upper gastrointestinal endoscopy, biopsy	106	4.90	0.02	3.42	\$5,747
P CT scan abdomen	74	3.42	0.01	2.09	\$3,665
P Diagnostic ultrasound of abdomen or retroperitoneum	66	3.05	0.01	1.88	\$2,666

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

**Table R-2**

**THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98**

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Calculus of urinary tract	2,100	100.00	0.33	2.33	\$4,511
P No procedure	712	33.90	0.11	2.09	\$2,112
P Transurethral excision, drainage, or removal urinary obstruction	414	19.71	0.07	2.02	\$5,535
P Intravenous pyelogram	239	11.38	0.04	1.67	\$2,199
P Nephrotomy and nephrostomy	205	9.76	0.03	3.79	\$10,348
P Other diagnostic radiology and related techniques	152	7.24	0.02	2.16	\$4,579
D Crushing injury or internal injury	2,097	100.00	0.33	5.77	\$15,757
P No procedure	601	28.66	0.10	3.18	\$5,574
P Incision of pleura, thoracentesis, chest drainage	271	12.92	0.04	4.75	\$8,644
P Procedures on spleen	174	8.30	0.03	7.42	\$21,662
P CT scan abdomen	105	5.01	0.02	3.94	\$7,281
P Suture of skin and subcutaneous tissue	76	3.62	0.01	3.91	\$8,530
D Poisoning by other medications and drugs	2,025	100.00	0.32	2.95	\$5,300
P No procedure	1,553	76.69	0.25	2.75	\$3,972
P Respiratory intubation and mechanical ventilation	149	7.36	0.02	3.84	\$12,379
P Other non-OR upper GI therapeutic procedures	98	4.84	0.02	1.60	\$4,207
P Nasogastric tube	33	1.63	0.01	1.48	\$3,972
P Other vascular catheterization, not heart	24	1.19	0.00	4.54	\$12,844
D Prolonged pregnancy	1,994	100.00	0.32	1.75	\$3,090
P Other procedures to assist delivery	630	31.59	0.10	1.57	\$2,807
P Episiotomy	429	21.51	0.07	1.47	\$2,524
P Repair of current obstetric laceration	293	14.69	0.05	1.60	\$2,843
P Forceps, vacuum, and breech delivery	213	10.68	0.03	1.78	\$3,141
P Cesarean section	173	8.68	0.03	3.42	\$5,904

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Cancer of prostate	1,992	100.00	0.32	3.58	\$9,016
P Open prostatectomy	1,362	68.37	0.22	3.91	\$9,775
P Transurethral resection of prostate (TURP)	282	14.16	0.04	2.65	\$5,682
P Therapeutic radiology	134	6.73	0.02	1.75	\$10,349
P Other OR therapeutic procedures, male genital	55	2.76	0.01	4.31	\$8,749
P No procedure	50	2.51	0.01	3.60	\$3,843
D Other lower respiratory disease	1,924	100.00	0.30	3.66	\$8,425
P No procedure	940	48.86	0.15	2.52	\$4,237
P Diagnostic bronchoscopy and biopsy of bronchus	112	5.82	0.02	5.76	\$11,891
P Other diagnostic procedures on lung and bronchus	89	4.63	0.01	6.79	\$20,632
P Diagnostic cardiac catheterization, coronary arteriography	77	4.00	0.01	2.32	\$8,515
P Respiratory intubation and mechanical ventilation	71	3.69	0.01	6.65	\$20,584
D Pulmonary heart disease	1,916	100.00	0.30	6.02	\$10,506
P No procedure	761	39.72	0.12	5.46	\$7,671
P Radioisotope pulmonary scan	382	19.94	0.06	5.39	\$8,267
P Other therapeutic procedures	133	6.94	0.02	5.46	\$7,820
P Other OR procedures on vessels other than head and neck	101	5.27	0.02	8.33	\$24,919
P Arterio- or venogram (not heart and head)	86	4.49	0.01	5.60	\$9,534
D Aspiration pneumonitis, food/vomitus	1,846	100.00	0.29	6.74	\$14,027
P No procedure	979	53.03	0.16	4.91	\$7,866
P Respiratory intubation and mechanical ventilation	196	10.62	0.03	9.98	\$31,930
P Other respiratory therapy	84	4.55	0.01	5.30	\$7,546
P Other vascular catheterization, not heart	55	2.98	0.01	6.80	\$15,774
P Upper gastrointestinal endoscopy, biopsy	53	2.87	0.01	7.04	\$13,064

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

**Table R-2**

**THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98**

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Other perinatal conditions	1,807	100.00	0.29	6.96	\$13,886
P Diagnostic spinal tap	631	34.92	0.10	3.14	\$5,114
P No procedure	611	33.81	0.10	3.27	\$4,324
P Respiratory intubation and mechanical ventilation	214	11.84	0.03	15.52	\$39,148
P Other vascular catheterization, not heart	53	2.93	0.01	8.04	\$16,670
P Other diagnostic procedures (interview, evaluation, consultation)	31	1.72	0.00	3.00	\$4,725
D Intestinal infection	1,791	100.00	0.28	3.27	\$4,605
P No procedure	1,365	76.21	0.22	2.53	\$3,079
P Colonoscopy and biopsy	136	7.59	0.02	4.82	\$7,468
P Diagnostic spinal tap	57	3.18	0.01	2.56	\$3,907
P Upper gastrointestinal endoscopy, biopsy	34	1.90	0.01	4.09	\$6,079
P CT scan abdomen	22	1.23	0.00	3.09	\$5,829
D Hemorrhage during pregnancy, abruptio placenta, placenta previa	1,786	100.00	0.28	3.37	\$4,798
P Cesarean section	615	34.43	0.10	5.52	\$7,836
P No procedure	348	19.48	0.06	2.58	\$2,904
P Other procedures to assist delivery	219	12.26	0.03	2.02	\$3,300
P Episiotomy	207	11.59	0.03	1.50	\$2,510
P Repair of current obstetric laceration	111	6.22	0.02	2.05	\$3,114
D Other nervous system disorders	1,745	100.00	0.28	4.35	\$9,740
P No procedure	406	23.27	0.06	4.30	\$5,728
P Other OR therapeutic nervous system procedures	266	15.24	0.04	3.06	\$8,305
P Other OR therapeutic procedures on bone	261	14.96	0.04	1.94	\$4,662
P Diagnostic spinal tap	143	8.19	0.02	5.14	\$10,966
P Incision and excision of CNS	92	5.27	0.01	5.01	\$13,456

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Other congenital anomalies	1,669	100.00	0.26	4.20	\$11,380
P Other OR therapeutic procedures on nose, mouth and pharynx	295	17.68	0.05	1.64	\$4,126
P Other OR therapeutic procedures on bone	178	10.67	0.03	3.03	\$7,461
P Spinal fusion	160	9.59	0.03	4.82	\$18,516
P Other therapeutic procedures on muscles and tendons	142	8.51	0.02	1.54	\$4,175
P Other OR therapeutic nervous system procedures	113	6.77	0.02	3.64	\$13,429
D Other bone disease and musculoskeletal deformities	1,648	100.00	0.26	3.46	\$11,466
P Hip replacement, total and partial	257	15.59	0.04	4.82	\$18,360
P Other OR therapeutic procedures on bone	241	14.62	0.04	2.57	\$7,852
P Spinal fusion	192	11.65	0.03	5.78	\$23,013
P Partial excision bone	163	9.89	0.03	2.17	\$6,408
P No procedure	153	9.28	0.02	3.53	\$4,531
D Heart valve disorders	1,637	100.00	0.26	7.35	\$36,428
P Heart valve procedures	1,150	70.25	0.18	8.28	\$44,364
P Diagnostic cardiac catheterization, coronary arteriography	198	12.10	0.03	3.06	\$11,342
P No procedure	140	8.55	0.02	4.17	\$5,036
P Diagnostic ultrasound of heart (echocardiogram)	44	2.69	0.01	2.95	\$5,581
P Other OR heart procedures	24	1.47	0.00	6.83	\$29,199
D Cancer of breast	1,566	100.00	0.25	2.90	\$8,982
P Mastectomy	1,096	69.99	0.17	2.29	\$6,146
P Lumpectomy, quadrantectomy of breast	217	13.86	0.03	1.61	\$4,904
P Other therapeutic procedures, hemic and lymphatic system	74	4.73	0.01	1.49	\$3,658
P Bone marrow transplant	53	3.38	0.01	19.36	\$85,902
P No procedure	48	3.07	0.01	3.73	\$6,044

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Hyperplasia of prostate	1,504	100.00	0.24	2.52	\$5,429
P Transurethral resection of prostate (TURP)	1,302	86.57	0.21	2.36	\$5,235
P Open prostatectomy	60	3.99	0.01	4.10	\$7,987
P No procedure	52	3.46	0.01	3.52	\$4,875
P Procedures on the urethra	27	1.80	0.00	2.70	\$4,584
P Other OR therapeutic procedures, male genital	22	1.46	0.00	2.23	\$4,379
D Other upper respiratory infections	1,471	100.00	0.23	2.24	\$3,666
P No procedure	1,040	70.70	0.16	1.99	\$2,698
P Other OR therapeutic procedures on nose, mouth and pharynx	122	8.29	0.02	2.84	\$7,999
P Diagnostic spinal tap	98	6.66	0.02	2.22	\$3,510
P Other respiratory therapy	54	3.67	0.01	1.96	\$2,742
P Respiratory intubation and mechanical ventilation	26	1.77	0.00	5.04	\$13,584
D Pleurisy, pneumothorax, pulmonary collapse	1,465	100.00	0.23	5.93	\$11,172
P Incision of pleura, thoracentesis, chest drainage	620	42.32	0.10	5.40	\$8,241
P No procedure	302	20.61	0.05	3.45	\$5,061
P Other OR therapeutic procedures on respiratory system	166	11.33	0.03	9.31	\$20,111
P Lobectomy or pneumonectomy	79	5.39	0.01	7.03	\$15,830
P Diagnostic bronchoscopy and biopsy of bronchus	35	2.39	0.01	7.06	\$11,805
D Inflammatory diseases of female pelvic organs	1,437	100.00	0.23	3.01	\$5,768
P Hysterectomy, abdominal and vaginal	573	39.87	0.09	2.87	\$6,203
P No procedure	289	20.11	0.05	3.08	\$3,980
P Oophorectomy, unilateral and bilateral	163	11.34	0.03	3.02	\$6,139
P Excision, lysis peritoneal adhesions	109	7.59	0.02	2.68	\$5,614
P Other operations on ovary	72	5.01	0.01	2.68	\$5,767

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Joint disorders and dislocations, trauma-related	1,436	100.00	0.23	2.35	\$7,597
P Arthroplasty knee	504	35.10	0.08	2.06	\$8,229
P Arthroplasty other than hip or knee	166	11.56	0.03	1.73	\$5,855
P Other OR therapeutic procedures on joints	113	7.87	0.02	2.53	\$6,761
P Excision of semilunar cartilage of knee	99	6.89	0.02	1.70	\$5,877
P No procedure	68	4.74	0.01	3.40	\$4,583
D Other nutritional, endocrine, and metabolic disorders	1,428	100.00	0.23	3.88	\$10,190
P Other OR upper GI therapeutic procedures	883	61.83	0.14	3.78	\$11,254
P No procedure	282	19.75	0.04	3.41	\$4,167
P Other OR therapeutic procedures on skin and breast	63	4.41	0.01	2.46	\$7,069
P Upper gastrointestinal endoscopy, biopsy	15	1.05	0.00	4.67	\$7,425
P Gastrostomy, temporary and permanent	14	0.98	0.00	3.14	\$5,439
D Senility and organic mental disorders	1,411	100.00	0.22	7.38	\$8,163
P No procedure	901	63.86	0.14	6.75	\$7,497
P Psychological and psychiatric evaluation and therapy	185	13.11	0.03	11.42	\$13,853
P Computerized axial tomography (CT) scan head	93	6.59	0.01	5.68	\$6,629
P Diagnostic spinal tap	45	3.19	0.01	6.42	\$9,455
P Magnetic resonance imaging	42	2.98	0.01	8.14	\$8,535
D Diabetes complicating pregnancy or birth	1,409	100.00	0.22	2.34	\$3,808
P Other procedures to assist delivery	269	19.09	0.04	1.61	\$2,881
P Cesarean section	246	17.46	0.04	3.86	\$6,372
P Episiotomy	223	15.83	0.04	1.65	\$2,827
P Repair of current obstetric laceration	178	12.63	0.03	1.78	\$3,063
P No procedure	173	12.28	0.03	3.02	\$3,492

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Sprains and strains	1,364	100.00	0.22	2.11	\$5,646
P Other therapeutic procedures on muscles and tendons	350	25.66	0.06	1.96	\$5,564
P Arthroplasty knee	324	23.75	0.05	1.57	\$7,528
P Arthroplasty other than hip or knee	290	21.26	0.05	1.70	\$5,236
P No procedure	228	16.72	0.04	3.50	\$3,573
P Other OR therapeutic procedures on joints	53	3.89	0.01	1.62	\$4,954
D Anxiety, somatoform, dissociative, and personality disorders	1,338	100.00	0.21	7.03	\$6,870
P No procedure	914	68.31	0.14	6.34	\$6,365
P Psychological and psychiatric evaluation and therapy	290	21.67	0.05	9.86	\$8,541
P Alcohol and drug rehabilitation/detoxification	16	1.20	0.00	7.69	\$6,581
P Diagnostic spinal tap	15	1.12	0.00	3.73	\$5,919
P Magnetic resonance imaging	12	0.90	0.00	3.83	\$6,475
D Transient cerebral ischemia	1,329	100.00	0.21	2.94	\$5,329
P No procedure	755	56.81	0.12	2.64	\$4,475
P Computerized axial tomography (CT) scan head	164	12.34	0.03	2.54	\$4,433
P Diagnostic ultrasound of heart (echocardiogram)	125	9.41	0.02	3.02	\$5,600
P Magnetic resonance imaging	53	3.99	0.01	3.25	\$6,240
P Cerebral arteriogram	46	3.46	0.01	3.96	\$8,746
D Cancer of colon	1,263	100.00	0.20	8.13	\$15,734
P Colorectal resection	1,020	80.76	0.16	8.59	\$16,965
P No procedure	90	7.13	0.01	4.66	\$4,606
P Colonoscopy and biopsy	33	2.61	0.01	4.58	\$8,090
P Other OR lower GI therapeutic procedures	21	1.66	0.00	9.76	\$17,625
P Appendectomy	9	0.71	0.00	3.00	\$5,675

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.



Table R-2

THREE-YEAR TOTAL NUMBER AND PERCENTAGE DISTRIBUTION OF HOSPITAL DISCHARGES, MEAN LENGTH OF STAY, AND MEAN HOSPITAL CHARGES FOR DISCHARGES DURING WHICH ONE OF THE TOP 100 PRIMARY DIAGNOSES OCCURRED AND THEIR ASSOCIATED PRINCIPAL PROCEDURES, UTAH HOSPITALS INPATIENT DISCHARGES: 1996-98

Most Frequent 100 Diagnoses with Top 5 Procedures	DISCHARGES			Mean Length Of Stay	Mean Hospital Charges
	Total Number	% of this diagnosis	% of all discharges		
D Occlusion or stenosis of precerebral arteries	1,262	100.00	0.20	3.28	\$9,883
P Endarterectomy, vessel of head and neck	1,034	81.93	0.16	3.12	\$9,954
P No procedure	70	5.55	0.01	4.74	\$9,042
P Cerebral arteriogram	57	4.52	0.01	3.42	\$7,682
P Other OR procedures on vessels other than head and neck	29	2.30	0.00	2.72	\$12,192
P Computerized axial tomography (CT) scan head	9	0.71	0.00	2.89	\$6,414
D Infective arthritis and osteomyelitis	1,259	100.00	0.20	6.60	\$10,969
P Other OR therapeutic procedures on joints	345	27.40	0.05	5.22	\$10,321
P No procedure	180	14.30	0.03	5.96	\$6,689
P Debridement of wound, infection or burn	124	9.85	0.02	10.15	\$16,818
P Partial excision bone	96	7.63	0.02	5.77	\$10,993
P Amputation of lower extremity	94	7.47	0.01	10.09	\$7,925
D Syncope	1,184	100.00	0.19	2.27	\$4,366
P No procedure	797	67.31	0.13	2.17	\$3,740
P Diagnostic ultrasound of heart (echocardiogram)	62	5.24	0.01	2.37	\$4,406
P Computerized axial tomography (CT) scan head	44	3.72	0.01	2.09	\$4,111
P Cardiac stress tests	30	2.53	0.00	1.90	\$4,686
P Diagnostic cardiac catheterization, coronary arteriography	28	2.36	0.00	2.64	\$8,248
D Meningitis (except by TB or STD s)	1,173	100.00	0.19	4.00	\$7,649
P Diagnostic spinal tap	709	60.44	0.11	3.35	\$5,665
P No procedure	330	28.13	0.05	3.14	\$4,300
P Other vascular catheterization, not heart	24	2.05	0.00	5.96	\$10,067
P Computerized axial tomography (CT) scan head	21	1.79	0.00	3.90	\$7,367
P Respiratory intubation and mechanical ventilation	21	1.79	0.00	8.71	\$27,218

\*Note: The shaded lines represent the principal diagnosis and the lines following represent associated principal procedures.

**Table R-3**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON PRIMARY PROCEDURES AMONG UTAH RESIDENTS, BY AGE AND SEX INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Diagnostic cardiac catheterization, coronary arteriography**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	8,523	138.6	5,364	175.0	3,158	102.3
0-4	91	15.3	46	15.1	45	15.6
5-14	26	2.4	20	3.5	6	1.1
15-24	50	4.4	32	5.6	18	3.1
25-34	107	11.7	78	16.6	29	6.5
35-44	560	64.2	408	93.8	152	34.7
45-44	1,515	248.8	1,064	351.7	451	147.2
55-64	1,873	502.8	1,240	683.5	632	330.8
65-74	2,363	793.5	1,418	1021	945	594.9
75-84	1,715	927.7	946	1223	769	715.1
85+	223	413.7	112	667.2	111	299.0

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-3**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON PRIMARY PROCEDURES AMONG UTAH RESIDENTS, BY AGE AND SEX INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Percutaneous transluminal coronary angioplasty (PTCA)**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	7,735	125.8	5,575	181.9	2,160	70.0
0-4	2	0.3	1	0.3	1	0.3
5-14	0	0.0	.	.	.	.
15-24	3	0.3	2	0.4	1	0.2
25-34	37	4.0	27	5.7	10	2.2
35-44	391	44.8	334	76.8	57	13.0
45-44	1,351	221.9	1,113	367.9	238	77.7
55-64	1,963	527.0	1,542	850.0	421	220.3
65-74	2,306	774.4	1,580	1137	726	457.0
75-84	1,465	792.5	868	1122	597	555.2
85+	217	402.5	108	643.4	109	293.6

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-3**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON PRIMARY PROCEDURES AMONG  
UTAH RESIDENTS, BY AGE AND SEX INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Arthroplasty knee**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	7,432	120.8	2,998	97.8	4,434	143.7
0-4	0	0.0	.	.	.	.
5-14	30	2.7	14	2.5	16	3.0
15-24	293	25.6	161	28.2	132	23.0
25-34	264	28.8	160	34.1	104	23.3
35-44	403	46.2	193	44.4	210	48.0
45-44	645	105.9	254	84.0	391	127.7
55-64	1,452	389.8	559	308.1	893	467.4
65-74	2,464	827.5	973	700.4	1,491	938.6
75-84	1,671	903.9	618	799.2	1,053	979.2
85+	210	389.5	66	393.2	144	387.9

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-3**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON PRIMARY PROCEDURES AMONG  
UTAH RESIDENTS, BY AGE AND SEX INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Appendectomy**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	7,032	114.3	3,714	121.2	3,317	107.5
0-4	93	15.7	51	16.7	42	14.6
5-14	1,547	139.9	858	151.2	689	128.1
15-24	2,298	200.8	1,144	200.5	1,153	200.8
25-34	1,333	145.5	723	153.9	610	136.7
35-44	849	97.3	447	102.8	402	91.8
45-44	441	72.4	261	86.3	180	58.8
55-64	223	59.9	111	61.2	112	58.6
65-74	158	53.1	84	60.5	74	46.6
75-84	67	36.2	26	33.6	41	38.1
85+	23	42.7	9	53.6	14	37.7

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-3**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON PRIMARY PROCEDURES AMONG  
UTAH RESIDENTS, BY AGE AND SEX INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Respiratory intubation and mechanical ventilation**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	6,953	113.0	3,946	128.7	3,007	97.5
0-4	3,423	576.2	2,010	658.2	1,413	489.5
5-14	156	14.1	92	16.2	64	11.9
15-24	258	22.5	163	28.6	95	16.5
25-34	262	28.6	147	31.3	115	25.8
35-44	429	49.2	235	54.0	194	44.3
45-44	422	69.3	215	71.1	207	67.6
55-64	476	127.8	235	129.5	241	126.1
65-74	691	232.0	377	271.4	314	197.7
75-84	642	347.3	375	484.9	267	248.3
85+	194	359.9	97	577.9	97	261.3

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-3**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON PRIMARY PROCEDURES AMONG UTAH RESIDENTS, BY AGE AND SEX INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Cholecystectomy and common duct exploration**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	6,889	112.0	2,136	69.7	4,752	154.0
0-4	5	0.8	.	.	5	1.7
5-14	27	2.4	10	1.8	17	3.2
15-24	727	63.5	52	9.1	675	117.6
25-34	949	103.6	166	35.3	782	175.3
35-44	1,007	115.4	266	61.2	741	169.3
45-44	1,017	167.0	313	103.5	704	229.8
55-64	934	250.8	343	189.1	591	309.3
65-74	1,100	369.4	509	366.4	591	372.0
75-84	857	463.6	396	512.1	461	428.7
85+	266	493.4	81	482.5	185	498.3

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-3**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON PRIMARY PROCEDURES AMONG UTAH RESIDENTS, BY AGE AND SEX INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Laminectomy, excision intervertebral disc**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	6,711	109.1	3,911	127.6	2,799	90.7
0-4	8	1.3	5	1.6	3	1.0
5-14	17	1.5	8	1.4	9	1.7
15-24	249	21.8	167	29.3	82	14.3
25-34	824	90.0	515	109.6	309	69.3
35-44	1,566	179.5	969	222.9	597	136.4
45-44	1,198	196.8	716	236.7	482	157.4
55-64	1,047	281.1	584	321.9	462	241.8
65-74	1,086	364.7	594	427.6	492	309.7
75-84	656	354.9	322	416.4	334	310.6
85+	60	111.3	31	184.7	29	78.1

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.



**Table R-3**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON PRIMARY PROCEDURES AMONG UTAH RESIDENTS, BY AGE AND SEX INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Cesarean section**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	6,558	.	.	.	6,557	637.6
0-4	0	.	.	.	0	.
5-14	4	.	.	.	4	2.4
15-24	2,178	.	.	.	2,178	1138
25-34	3,430	.	.	.	3,430	2306
35-44	930	.	.	.	930	637.3
45-44	13	.	.	.	13	12.7
55-64	1	.	.	.	0	0.5
65-74	0	.	.	.	.	.
75-84	0	.	.	.	0	.
85+	0	.	.	.	0	.

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-3**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON PRIMARY PROCEDURES AMONG UTAH RESIDENTS, BY AGE AND SEX INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Hip replacement, total and partial**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	5,764	93.7	2,206	72.0	3,558	115.3
0-4	2	0.3	1	0.3	1	0.3
5-14	3	0.3	3	0.5	.	.
15-24	26	2.3	7	1.2	19	3.3
25-34	68	7.4	33	7.0	35	7.8
35-44	204	23.4	112	25.8	92	21.0
45-44	430	70.6	208	68.8	222	72.5
55-64	829	222.6	385	212.2	444	232.4
65-74	1,617	543.0	653	470.0	964	606.9
75-84	1,755	949.4	603	779.8	1,152	1071
85+	830	1540	201	1197	629	1694

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-3**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON PRIMARY PROCEDURES AMONG UTAH RESIDENTS, BY AGE AND SEX INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Upper gastrointestinal endoscopy, biopsy**

AGE GROUPS MALES _____	TOTAL		MALES		FE-	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	5,724	93.1	2,702	88.2	3,022	
97.9						
0-4	70	11.8	36	11.8	34	
11.8						
5-14	43	3.9	24	4.2	19	
3.5						
15-24	222	19.4	100	17.5	122	
21.3						
25-34	345	37.7	180	38.3	165	
37.0						
35-44	579	66.4	311	71.5	268	
61.2						
45-44	649	106.6	323	106.8	326	
106.4						
55-64	709	190.3	375	206.7	334	
174.8						
65-74	1,133	380.5	546	393.0	587	
369.5						
75-84	1,350	730.3	579	748.8	771	
717.0						
85+	624	1157	228	1358	396	
1067						

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-3**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON PRIMARY PROCEDURES AMONG  
UTAH RESIDENTS, BY AGE AND SEX INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Spinal fusion**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	4,854	78.9	2,340	76.3	2,514	81.5
0-4	11	1.9	4	1.3	7	2.4
5-14	147	13.3	43	7.6	104	19.3
15-24	295	25.8	143	25.1	152	26.5
25-34	427	46.6	244	51.9	183	41.0
35-44	1,220	139.8	650	149.5	570	130.2
45-44	1,172	192.5	555	183.5	617	201.4
55-64	786	211.0	356	196.2	430	225.1
65-74	572	192.1	260	187.1	312	196.4
75-84	217	117.4	82	106.0	135	125.5
85+	7	13.0	3	17.9	4	10.8

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-3**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON PRIMARY PROCEDURES AMONG  
UTAH RESIDENTS, BY AGE AND SEX INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Coronary artery bypass graft (CABG)**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	4,610	75.0	3,516	114.7	1,094	35.5
0-4	0	0.0	.	.	.	.
5-14	0	0.0	.	.	.	.
15-24	0	0.0	.	.	.	.
25-34	13	1.4	10	2.1	3	0.7
35-44	110	12.6	94	21.6	16	3.7
45-44	587	96.4	503	166.3	84	27.4
55-64	1,135	304.7	915	504.4	220	115.1
65-74	1,681	564.5	1,241	893.3	440	277.0
75-84	1,025	554.5	719	929.8	306	284.6
85+	59	109.4	34	202.5	25	67.3

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-3**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON PRIMARY PROCEDURES AMONG UTAH RESIDENTS, BY AGE AND SEX INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Transurethral resection of prostate (TURP)**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	1,870	30.4	1,870	61.0	.	.
0-4	0	0.0	.	.	.	.
5-14	0	0.0	.	.	.	.
15-24	0	0.0	.	.	.	.
25-34	2	0.2	2	0.4	.	.
35-44	10	1.1	10	2.3	.	.
45-44	83	13.6	83	27.4	.	.
55-64	325	87.3	325	179.2	.	.
65-74	693	232.7	693	498.8	.	.
75-84	598	323.5	598	773.3	.	.
85+	159	294.9	159	947.2	.	.

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-4**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON DIAGNOSES AMONG UTAH RESIDENTS, BY AGE AND SEX, INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Acute myocardial infarction**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
-----						
TOTAL	8,791	142.9	5,955	194.3	2,836	91.9
0-4	0	0.0	.	.	.	.
5-14	0	0.0	.	.	.	.
15-24	5	0.4	5	0.9	.	.
25-34	54	5.9	42	8.9	12	2.7
35-44	433	49.6	355	81.6	78	17.8
45-44	1,282	210.6	1,062	351.1	220	71.8
55-64	1,892	507.9	1,497	825.2	395	206.7
65-74	2,299	772.0	1,523	1096	776	488.5
75-84	2,040	1104	1,115	1442	925	860.2
85+	786	1458	356	2121	430	1158

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-4**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON DIAGNOSES AMONG UTAH RESIDENTS, BY AGE AND SEX, INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Coronary atherosclerosis and other heart disease**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	14,778	240.3	10,182	332.2	4,596	149.0
0-4	1	0.2	.	.	1	0.3
5-14	1	0.1	1	0.2	.	.
15-24	3	0.3	2	0.4	1	0.2
25-34	60	6.6	42	8.9	18	4.0
35-44	511	58.6	413	95.0	98	22.4
45-44	2,226	365.6	1,754	579.8	472	154.1
55-64	3,242	870.4	2,461	1357	781	408.8
65-74	4,664	1566	3,159	2274	1,505	947.4
75-84	3,416	1848	2,073	2681	1,343	1249
85+	654	1213	277	1650	377	1016

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.



**Table R-4**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON DIAGNOSES AMONG UTAH RESIDENTS, BY AGE AND SEX, INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Affective Disorders**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	13,275	215.8	5,310	173.2	7,965	258.1
0-4	2	0.3	1	0.3	1	0.3
5-14	895	81.0	458	80.7	437	81.2
15-24	3,147	275.0	1,260	220.9	1,887	328.7
25-34	2,472	269.9	927	197.3	1,545	346.3
35-44	3,106	355.9	1,156	265.9	1,950	445.4
45-44	1,819	298.8	801	264.8	1,018	332.3
55-64	674	181.0	295	162.6	379	198.4
65-74	565	189.7	216	155.5	349	219.7
75-84	450	243.4	159	205.6	291	270.6
85+	145	269.0	37	220.4	108	290.9

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-4**

ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON DIAGNOSES AMONG UTAH RESIDENTS, BY  
AGE AND SEX INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Congestive heart failure, nonhypertensive**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	7,848	127.6	3,719	121.3	4,128	133.8
0-4	34	5.7	20	6.5	14	4.9
5-14	28	2.5	15	2.6	13	2.4
15-24	29	2.5	22	3.9	7	1.2
25-34	43	4.7	26	5.5	17	3.8
35-44	137	15.7	85	19.5	52	11.9
45-44	320	52.6	202	66.8	118	38.5
55-64	786	211.0	414	228.2	372	194.7
65-74	1,866	626.6	998	718.4	868	546.4
75-84	2,885	1561	1,321	1708	1,563	1453
85+	1,720	3191	616	3670	1,104	2974

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-4**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON DIAGNOSES AMONG UTAH RESIDENTS, BY AGE AND SEX, INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Acute cerebrovascular disease**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
-----						
TOTAL	7,189	116.9	3,271	106.7	3,916	126.9
0-4	22	3.7	14	4.6	8	2.8
5-14	25	2.3	17	3.0	8	1.5
15-24	47	4.1	28	4.9	19	3.3
25-34	78	8.5	36	7.7	42	9.4
35-44	177	20.3	78	17.9	98	22.4
45-44	422	69.3	239	79.0	183	59.7
55-64	736	197.6	400	220.5	335	175.3
65-74	1,826	613.2	922	663.7	904	569.1
75-84	2,487	1345	1,061	1372	1,426	1326
85+	1,369	2539	476	2836	893	2405

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-4**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON DIAGNOSES AMONG UTAH RESIDENTS, BY AGE AND SEX, INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Pneumonia (except that caused by tuberculosis or STDs)**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	17,733	288.3	9,125	297.7	8,607	278.9
0-4	3,387	570.2	1,899	621.8	1,488	515.5
5-14	876	79.2	442	77.9	434	80.7
15-24	646	56.4	339	59.4	307	53.5
25-34	703	76.8	329	70.0	374	83.8
35-44	1,014	116.2	509	117.1	505	115.3
45-44	1,107	181.8	522	172.6	585	191.0
55-64	1,342	360.3	667	367.7	675	353.3
65-74	2,572	863.7	1,396	1005	1,176	740.3
75-84	3,779	2044	2,007	2595	1,771	1647
85+	2,307	4279	1,015	6047	1,292	3480

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-4**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON DIAGNOSES AMONG UTAH RESIDENTS, BY AGE AND SEX, INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Appendicitis and other appendiceal conditions**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	6,892	112.1	3,821	124.7	3,070	99.5
0-4	88	14.8	47	15.4	41	14.2
5-14	1,525	137.9	863	152.1	662	123.1
15-24	2,167	189.3	1,162	203.7	1,004	174.9
25-34	1,277	139.4	740	157.5	537	120.4
35-44	853	97.8	461	106.0	392	89.5
45-44	478	78.5	290	95.9	188	61.4
55-64	224	60.1	119	65.6	105	55.0
65-74	174	58.4	94	67.7	80	50.4
75-84	79	42.7	33	42.7	46	42.8
85+	27	50.1	12	71.5	15	40.4

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-4**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON DIAGNOSES AMONG UTAH RESIDENTS, BY AGE AND SEX, INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Biliary tract disease**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	7,572	123.1	2,444	79.7	5,128	166.2
0-4	15	2.5	3	1.0	12	4.2
5-14	33	3.0	14	2.5	19	3.5
15-24	743	64.9	60	10.5	683	119.0
25-34	974	106.3	176	37.5	798	178.9
35-44	1,087	124.6	300	69.0	787	179.8
45-44	1,126	184.9	355	117.3	771	251.7
55-64	1,010	271.2	384	211.7	626	327.6
65-74	1,237	415.4	574	413.2	663	417.4
75-84	1,005	543.6	472	610.4	533	495.7
85+	342	634.4	106	631.5	236	635.7

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

Table R-4

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON DIAGNOSES AMONG UTAH RESIDENTS, BY AGE AND SEX, INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Osteoarthritis**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	10,141	164.9	4,005	130.7	6,136	198.9
0-4	1	0.2	1	0.3	.	.
5-14	0	0.0	.	.	.	.
15-24	10	0.9	5	0.9	5	0.9
25-34	64	7.0	35	7.5	29	6.5
35-44	277	31.7	133	30.6	144	32.9
45-44	851	139.8	374	123.6	477	155.7
55-64	1,992	534.8	834	459.7	1,158	606.1
65-74	3,840	1290	1,513	1089	2,327	1465
75-84	2,722	1472	990	1280	1,732	1611
85+	384	712.3	120	714.9	264	711.1

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-4**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON DIAGNOSES AMONG UTAH RESIDENTS, BY AGE AND SEX, INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Spondylosis, intervertebral disc disorders, other back problems**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	11,305	183.8	6,108	199.3	5,196	168.4
0-4	5	0.8	1	0.3	4	1.4
5-14	13	1.2	6	1.1	7	1.3
15-24	329	28.7	191	33.5	138	24.0
25-34	1,196	130.6	722	153.7	474	106.2
35-44	2,757	315.9	1,605	369.1	1,152	263.1
45-44	2,320	381.1	1,256	415.2	1,064	347.4
55-64	1,773	476.0	923	508.8	849	444.3
65-74	1,695	569.2	878	632.0	817	514.3
75-84	1,038	561.5	460	594.9	578	537.5
85+	179	332.0	66	393.2	113	304.4

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.



**Table R-4**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON DIAGNOSES AMONG UTAH RESIDENTS, BY AGE AND SEX, INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Complication of device, implant or graft**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	7,732	125.7	4,076	133.0	3,656	118.5
0-4	328	55.2	202	66.1	126	43.7
5-14	378	34.2	194	34.2	184	34.2
15-24	418	36.5	212	37.2	206	35.9
25-34	457	49.9	244	51.9	213	47.7
35-44	739	84.7	399	91.8	340	77.7
45-44	936	153.7	512	169.2	424	138.4
55-64	1,102	295.9	566	312.0	536	280.5
65-74	1,696	569.5	937	674.5	759	477.8
75-84	1,294	700.0	642	830.2	652	606.3
85+	384	712.3	168	1001	216	581.8

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

**Table R-4**

AVERAGE ANNUAL NUMBER AND HOSPITALIZATION RATE (PER 100,000 PERSONS) FOR SELECTED COMMON DIAGNOSES AMONG UTAH RESIDENTS, BY AGE AND SEX, INPATIENT DISCHARGES FROM UTAH HOSPITALS: 1996-98

**Complications of surgical procedures or medical care**

AGE GROUPS	TOTAL		MALES		FEMALES	
	No. of Discharges	Rate	No. of Discharges	Rate	No. of Discharges	Rate
TOTAL	6,870	111.7	3,264	106.5	3,605	116.8
0-4	165	27.8	99	32.4	66	22.9
5-14	169	15.3	100	17.6	69	12.8
15-24	431	37.7	188	33.0	243	42.3
25-34	689	75.2	261	55.6	427	95.7
35-44	1,048	120.1	400	92.0	648	148.0
45-44	1,030	169.2	468	154.7	562	183.5
55-64	1,014	272.2	521	287.2	493	258.0
65-74	1,234	414.4	693	498.8	541	340.6
75-84	871	471.2	447	578.1	424	394.3
85+	219	406.2	87	518.3	132	355.6

SOURCE: Utah Hospital Inpatient Discharge Database, 1996-98, Utah Department of Health.

# Inpatient Hospitalization of Utahns for Most Common Procedures and Diagnoses in 1996-1998 Feedback Form

We welcome your opinions of this report. Please help us by completing this page and returning it to:

Office of Health Care Statistics, Utah Department of Health  
288 North 1460 West, 4th Floor, P.O. Box 144004, Salt Lake City, Utah 84114-4004  
Phone: (801) 538-9944 fax: (801) 538-9916 e-mail: gshah@doh.state.ut.us

## Why were you interested in this report? (Check all that apply)

- ☐ Policy setting and strategic planning (allocation of resources, setting priorities, etc)
- ☐ Program planning and monitoring (tracking progress on program objectives, etc)
- ☐ Background information for research, funding proposals, etc.
- ☐ Advocacy for special population group(s)
- ☐ Satisfying requests for information from others who contact you
- ☐ Other (specify): \_\_\_\_\_

## For what specific activities did you use the information in this report?

## Which information in this report did you find most useful?

## What could we have done to make the information more useful?

- a. Was the purpose clearly stated?..... ☐ yes ☐ no
- b. Was it organized so that you could find information easily? ..... ☐ yes ☐ no
- c. Was it presented in a way that was clear and understandable?..... ☐ yes ☐ no
- d. Were the graphs easy to understand?..... ☐ yes ☐ no
- e. Were the reference tables easy to understand? ..... ☐ yes ☐ no
- f. Did the text contain sufficient explanations?..... ☐ yes ☐ no
- g. Did it have a professional appearance?..... ☐ yes ☐ no
- h. Did the report contain the right amount of information? ..... ☐ yes ☐ no
- i. Please clarify your answers to questions #5a-h if necessary:\_\_\_\_\_ ☐ yes ☐ no

## What other topics would you like to see covered in future reports?

## Is there anything else you can tell us that could help us with future reports of this type?

Thank you. If you'd like, you may provide your name, address and phone number. We may want to call to discuss your ideas further. (optional)

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
e-mail: \_\_\_\_\_